+Directors only

## Change of director or secretary or change of particulars.

Company number	CN 14245
Company name	Bank of Scotland Edinburgh Nominees Limited
Company name	
Appointment	Day Month Year
(Turn to Date of appointment next page	DA 15 02 96
for resign- Appointment of director	СБ
ation and change of Appointment of secretary parti-	cs x
culars) Name *Style/Title	Miss
Forenames	Lysanne Jane Warren
Surname	Black
*Honours etc	
Previous forenames	
Previous surname	
Usual residential address	2A Carlton Street, EDINBURGH,
	EH4 1NJ.
Post town	
County/Region	
Postcode	Country
Date of birth+	DO Nationality+ NA
Business occupation+	ос
SCT *SH6DGJLC* 455 COMPANIES HOUSE 05/03/96	I consent to act as secretary of the above named company
COMPANIES HOUSE 29/02/96	28/2/00
Consent signature *Voluntary details	Signed hypermal Willach Date 28/2/96
	serving director etc must also sign the form on page

DO

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Re	c	i	an	a t	ń	on

(This includes

Date of resignation etc

any form of ceasing to hold office

Resignation as director

eq death or removal from

office)

Resignation as secretary

Forenames

Surname

Date of birth (directors only)

If cessation is other than resignation, please state reason (eg death)

Change of particulars

Date of change

of particulars

Change of particulars,

as director Change of particulars,

as secretary

Forenames

Surname

(name previously notified to Companies House)

Date of birth (directors only)

Change of name

Forenames

(enter new name)

Surname

Change of usual residential address (enter new address)

Post town

County/region

Postcode

Other change

(please specify)

After signing, please return the form to the Registrar of Companies at Companies House, Crown Way Cardiff CF4 3UZ

Signature

for companies registered in England and Wales,

Companies House 100-102 George Street Edinburgh EH2 3DJ

for companies registered in Scotland

To whom should Companies House direct any enquiries about the information on this form?

DC	
ZD	
zs	
DO	
NN	
AD	
Ab	
	Country

A serving director, secretary etc must sign the form below.

Signed Lipanne WDluck (by a serving director/secretary/administrator/ administrative receiver/receiver) (delete as appropriate)

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