

Please complete in typescript, or in bold black capitals

288b

Resignation of director or secretary

Compar	ny Number	10322	4 						
Company N	ame in full	CHAR	T INSUR	ANCE S	ERVIC	ES LIN	IITED		
SCT *SSUAZUZJ* COMPANIES HOUSE 17/03/	<u>72</u> '97								
Resignation									
orm		Day	Month	Year	-,				
Date of resignation		03	03	97					
Resignation as director		X as secretary Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.							nation oxes.
NAME Please insert	*Style / Title	MR.					*Honours etc		
reviously	Forename(s)	PETER							
otified to Companies House.	Surname	COSGROVE							
		Day	Month	Year	7				
†Date of Birth			03	52					
If cessation is othe resignation, please									
Voluntary details. Directors only.	Signed			tor, seci	-	etc mu	st sign the fo	rm below.	
		(by a servir		\supset	$\overline{}$	or / admini	strative receiver / rec	ceiver manager / recei	wer)
lease give the name, addres elephone number and, if avai DX number and Exchange o	MR M L YOUNG, LEX SERVICE PLC, LEX HOUSE, BOSTON DRIVE, BOURNE END, SL8 5YS								
ne person Companies House should ontact if there is any query.		Tel 01628 843888							
	DX number DX exchange								
orm revised March 1995		Registr Compa for com Compa	ar of Cor anies Ho apanies r	npanies use, Cro egistereo use, 37	at: own W a d in Eng Castle	ay, Car gland a Terrac	the form plea diff, CF4 3UZ nd Wales o e, Edinburgh	r	Card