

Company Number

Please complete in typescript, or in bold black capitals.

Company Name in full	SOMH WALLS ASSOCIATION FOR THE
	PREVENTION OF ADDICTION LYD.
× F 2 8 8 B 0 1 9 ×	
Resignation	Day Month Year
form Date of resignation	08 05 94
Resignation as director	as secretary Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
NAME *Style / Title	Rev. *Honours etc
Please insert details as Forename(s)	CIARLTIA
previously notified to Surname Companies House.	FOSTER
Companies Heads.	Day Month Year
†Date of Birth	19 12 44
If cessation is other than resignation, please state reason	

1073381.

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

Signed

* Voluntary details. † Directors only.

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.



Form revised March 1995

Date

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/h o oon iir	en director / coarcton / administrator / adminis

dministrator / administrative receiver / receiver manager / receiver)

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I NEVILLE STREET, CARDIFF			
-	Tel 0/222	383313.	
DX number	DX exchange		

When you have completed and signed the form please send it to the Registrar of Companies at:

DX 33050 Cardiff Companies House, Crown Way, Cardiff, CF4 3UZ for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland

DX 235 Edinburgh