

APPOINTMENT of director or secretary

(NOT for resignation (use Form 288b) or
change of particulars (use Form 288c))

Please complete in typescript,
or in bold black capitals.

CHFP010

Company Number

1888799

Company Name in full

ASSOCIATION OF ANAESTHETISTS OF GREAT BRITAIN AND
IRELAND

Appointment form

Notes on completion
appear on next page.

Appointment as director

Date of
appointment

Day	Month	Year	† Date of Birth	Day	Month	Year
2	2	09	2	0	0	5

X

as secretary

Please mark the appropriate box. If appointment is
as a director and secretary mark both boxes.

NAME * Style / Title

Professor

* Honours etc

Forename(s)

John Robert

Surname

Sneyd

Previous
forename(s)

Previous
surname(s)

**Usual residential
address**

South Coldrenick, Menhenoit

Post town

Liskeard

Postcode

PL14 3RQ

County / Region

Country

† Nationality

British

† Business
occupation

Medical Practitioner

† Other directorships
(additional space next page)

See attached schedule

I consent to act as ** director / ~~secretary~~ of the above named company

Consent signature

[Signature]

Date

27/9/05

A director, secretary etc must sign the form below.

Signed

[Signature]

Date

1 Oct 2005

(**a director / secretary / administrator / administrative receiver / receiver manager / receiver)

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.

F M Wirgman, 21 Portland Place, London, W1B 1PY

Tel

DX number

DX exchange

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

Companies House, Crown Way, Cardiff, CF14 3UZ

DX 33050 Cardiff

for companies registered in England and Wales

or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland

DX 235 Edinburgh



A39
COMPANIES HOUSE
22/10/2005

Company Number

1888799

† Directors only.

† Other directorships

NOTES

Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential line.

Give previous forenames or surname(s) except:

- for a married woman, the name by which she was known before marriage need not be given.
- for names not used since the age of 18 or for at least 20 years.

A peer or individual known by a title may state the title instead of or in addition to the forenames and surname and need not give the name by which that person was known before he or she adopted the title or succeeded to it.

Other directorships.

Give the name of every company incorporated in Great Britain of which the person concerned is a director or has been a director at any time in the past five years.

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

- dormant
- a parent company which wholly owned the company making the return, or
- another wholly owned subsidiary of the same parent company.

*Please complete in typescript,
or in bold black capitals.*

CHFP010

Company Number

1888799

Company Name in full

ASSOCIATION OF ANAESTHETISTS OF GREAT BRITAIN AND
IRELAND

Name

John Robert Sneyd

Company Name	Resignation
ASSOCIATION OF ANAESTHETISTS OF GREAT BRITAIN AND IRELAND EDUCATION AND RESEARCH TRUST PMS (Facilities) Plymouth Limited	