

Please complete in typescript, or in bold black capitals.
CHFP000

Company Number

Company Name in full

288b

RESIGNATION of director or secretary (NOT for appointment (use Form 288a) or change of particulars (use Form 288c))

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-	MERCIA	HEALTHOME	LIMITED		

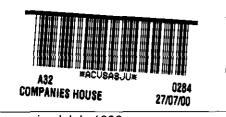
Resignation form	Date of resigna	Day Month Year ion 1 2 0 7 2 0 0 0
	Resignation as dire	tor as secretary Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
	NAME *Style /	tle MR *Honours etc
Please insert details as previously	Forenam	(s) ROGER MARK
notified to	Surn	me THOMPSON
Companies Hous	e.	Day Month Year
	[†] Date of	irth 1 7 0 1 1 9 5 4
	ition is other than	on

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

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* Voluntary details.

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 July 1998

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Date 12/7/2000

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

MERCIA	MEARINCARE	LIMITED	Mnuc)	HOSPIAL
- JOHE GW	1 POAS	KERCENS	HR12B	√
	Tel	01432	37497x	
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 I

DX 235 Edinburgh

[†] Directors only.

^{**} Delete as appropriate