



Companies House
— for the record —

288ab(I)

**Resignation /
Appointment of
Director or Secretary**

CHFP000

When to use this form

Use this form to tell us about one resignation and/or one appointment of a Director or Secretary.
If you need to tell us about further resignations or appointments, please use separate forms.

How to fill in this form

Please fill in this form

- using block capitals
- in black ink
- with one character per box (unless typewritten)
- leaving boxes blank if they do not apply to you

Example:

Company name

E	X	A	M	P	L	E		C	O	M	P	A	N	Y		L	I	M	I	T	E	D		
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Where to send this form

Please return this form to the Registrar of Companies at:

- **Companies House, Crown Way, Cardiff, CF4 3UZ.** **DX 33050 Cardiff**
for companies registered in England and Wales, or
- **Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB.** **DX 235 Edinburgh**
for companies registered in Scotland.

Further information

If you need further help on completing this form please telephone our enquiry unit on:
01222 380801, or access our website on: **<http://www.companieshouse.gov.uk>**



000288A01V1

Please turn over ➡

1 Change details

Please put an 'X' in the appropriate box.

What is the change?

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Resignation
(fill in parts
2, 4, 5 and 6). | <input type="checkbox"/> Appointment
(fill in parts
2, 3, 5 and 6). | <input type="checkbox"/> Resignation and
Appointment (fill in
parts 2, 3, 4, 5 and 6). |
|--|---|--|

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2 Company details

Please fill in the following details using BLOCK CAPITALS.

Company number 3721601

Company name EFAX LIMITED
(in full)

3 New appointment details

Please put an 'X' in the appropriate box(es), and fill in the following details using BLOCK CAPITALS.

Date of appointment	Day	Month	Year			
Position	Director		Secretary			
Title	Mr	Mrs	Miss	Ms	Dr	
			Other	Corporate (please put an 'X' in this box if the appointment relates to a company acting as a director/secretary).		

Surname or
company name

First forename
(in full)

Other forename(s)
(in full)

I consent to be a Director and/or Secretary of the above company shown at part 2 of this form.

Signed

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3 New appointment details (continued)

Usual residential address:

Property name /
flat number (if applicable)

Property number

Street name

Remainder of
address

Postcode
(Always complete)

Previous names (if any):

Surname(s)

Forename(s)

The following details are only required for Directors:

Date of birth

Day	Month	Year
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Nationality

British	Other
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Business
occupation

Please provide details of other directorships on a separate sheet of paper
marked with the company number and attach to this form.

4 Resignation details

Please put an 'X' in the appropriate box(es), and fill in the following details using BLOCK CAPITALS.

Date of resignation

Day	Month	Year
02	07	1999

Position

Director	X Secretary
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Surname or
company name

ABOVE BOARD LIMITED

First forename
(in full)

Date of birth
(directors only)

Day	Month	Year
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Please turn over ➡

5 Contact address

Please complete using **BLOCK CAPITALS** the name and address of the person we should contact if there are any queries about this form.

Contact name

☎ (inc area code)

Property number

Street name

Remainder of
address

Postcode
(Always complete)

DX number
(if applicable)

DX exchange

6 Signature

A serving director or secretary etc must sign below.

Signed



(*Director / secretary / administrator / administrative receiver
/ receiver manager / receiver)

* Delete as appropriate.

Date

Day

Month

Year

05

07

1999

For official use only

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