



296

Change of director or secretary or change of particulars

This form should be completed in black

Company Number

Company Name

CN	N1057046	
BANCHESTER HEALTHCARE (NORTHERN IRELAND) LTD		

Appointment

(Turn over page for resignation and change of particulars).

Date of appointment

Appointment of director

DA									
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CD	
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CS	
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Please mark the appropriate box.
If the appointment is as director and secretary mark both boxes.

NOTES

Appointment of secretary

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 address line.

Name *Style/Title

Forenames

Surname

Give previous forenames or surname except:

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

Previous forenames

Previous surname

Usual residential address

AD	
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A peer or an individual known by a title may state the title instead of or in addition to the forenames and surname.

Post town

County/Region

Postcode

Country

Other directorships

Give the name of every company of which the person concerned is a director or has been a director at any time in the past 5 years, exclude a company which either is, or at all times during the past five years when the person was a director, was

Date of birth†

Business occupation†

Other directorships†

DO									
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Nationality†

NA

OC	
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Consent Signature

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

Signed _____ Date _____

A serving director etc. must also sign the form overleaf.

* Voluntary details

† Directors only

(This includes any form of ceasing to hold office e.g. death or removal from office).

Resignation etc. as director

Resignation etc. as secretary

Forenames

Surname

Date of birth (*directors only*)

If cessation is other than resignation,
please state reason (e.g. death)

DR	0	1	1	1	2	0	0	7
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XD	<input checked="checked" type="checkbox"/>
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XS	<input type="checkbox"/>
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Please mark the appropriate box.
If change of particulars etc., is as director and
secretary mark both boxes

EAMON
MC ELROY

DO	1	8	0	1	1	9	7	2
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Complete this section in all cases where particulars have changed and then the appropriate section below.

Date of change of particulars

Change of particulars as director

Change of particulars as secretary

Forenames } (names previously
Surname } notified to Companies
Registry)

Date of birth (*directors only*)

DC							
ZD		<p><i>Please mark the appropriate box.</i> <i>If change of particulars etc., is as director and secretary mark both boxes</i></p>					
ZS							

DO							
NN							

AD							
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Country _____

Change of name

(enter new name)

Forenames

Surname

Change of usual residential address
(enter new address)

Post town

County/Region

Postcode

Other Change

(please specify)

A serving director / secretary etc. must also sign the form below

Signature

Signed

Date _____

(by a serving director / ~~secretary~~ / administrator / administrative receiver). (Delete as appropriate)

After signing please return the form to
the Registrar of Companies at

Waterfront Plaza, 8 Laganbank Road,

To whom should Companies Registry direct any enquiries about the information shown on this form?

LESLIE FITZPATRICK
 c/o BARCHESTER Heathcare Ireland
 CLONSKEATH. Postcode D-14
 Telephone 353-1-2180400 Extension —