

288b

Please complete in typescript, or in bold black capitals.

Resignation of director or secretary

Co ########### * F 2 B B I	Company Number ompany Name in full 3 0 1 9 ×	WORKING MEN'S COLLEGE CORPORATION
Resignation form	Date of resignation Resignation as director	Day Month Year 14 08 97 as secretary Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
	NAME *Style / Title	MR *Honours etc
Please insert details as previously notified to	Forename(s) Surname	RONALD GEORGE MIDDIFION
Companies House	[†] Date of Birth	Day Month Year 31 07 13
	ation is other than tion, please state reason	31 07 13

Si	g	ne	C
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* 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

A serving director,	secretary	etc must	sign	the f	orm	below.
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h I horry	Date	6.4.98

(by a serving director /-secretary / administrator / administrative receiver / receiver manager /- receiver

MR M. MOO	KRIDGE, WORKING MEN'S
COLLEGE,	44 CROWNDALE ROAD, LONDON, NW1 1TR.
	Tel 0171 387 2037
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, CF4 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