

Please complete in typescript, or in bold black capitals

288b

Resignation of director or secretary

	Company Number	36142				
	Company Name in full	The Medical Protection Society Limited				
* F28	88BD40 *					
Resignatio	n					
form		Day Mont	h Year			
	Date of resignation	21 05	97			
	Resignation as director	X as secr	etary	Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.		
Please insert details as previously notified to Companies Ho	NAME *Style / Title	DR		*Honours etc		
	Forename(s)	MAURICE JAMES HEALY				
	Surname use.					
	† Date of Birth	Day Month	Year			
If cest resign	sation is other than lation, please state reason	Retirement				
		A serving direct	or, secretary	etc must sign the	e form below.	
Voluntary details. Directors only.	Signed	Ow.	Litte) Date		
	ŧ	oy a serving director /	-secretary / admir	nistrator / administrativo	receiver / receiver n	nanager-/-receiver)

L J WHITTLE

50 Hallam Street

LONDON W1N 5DE

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

DX number DX exchange

When you have completed and signed the form please send it to the

Tel 0171-637-0541

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