

Resignation of director or secretary

Please complete in typescript, or in bold black capitals.

	Company Number	965783	
	ompany Name in full B 0 1 9 X	Business Post LTD	
Resignation form	Date of resignation Resignation as director	Day Month Year Ot 02 99 as secretary Please mark the apis as a director and	ppropriate box. If resignation I secretary mark both boxes.
Please insert details as previously	NAME *Style / Title Forename(s)	JAMES PERCUAL	
	Surname †Date of Birth tion is other than ion, please state reason	MAIR. Day Month Year	
A serving director, secretary etc must sign the form below.			
* Voluntary details. † Directors only.	Signed	Date Dy a serving director (constant to the internal to the i	L () 2 / 7%
telephone number and, if available, a DX number and Exchange of		Y a serving director / secretary / administrator / administrative receiver / receiver manager / receiver P. FITZUSILLIAM, BUSINESS POST LTD SXMESS HOUSE, YOU, BERKSHUE AVENUE, SLOUGH.	

BERKSHAE **DX** number

Form revised March 1995

When you have completed and signed the form please send it to the Registrar of Companies at:

DX exchange

Companies House, Crown Way, Cardiff, CF4 3UZ for companies registered in England and Wales Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland

Tel 01753 - 819918

DX 235 Edinburgh

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