

Please complete in typescript, or in bold black capitals

## 288b

## Resignation of director or secretary

Company Number  Company Name in full		1772586
		AUTOMOBILE ASSOCIATION FINANCIAL SERVICES LIMITED
* F2	88BD40 *	
Resignation form	on	Day Month Year
	Date of resignation	19 02 96
	Resignation as director	as secretary  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	Mr *Honours etc FCA, MCT
	Forename(s)	Robert Henry Armitage
	Surname ouse.	Chase
		Day Month Year
	† Date of Birth	
If cessation is other than resignation, please state reason		CEASED TO BE ALTERNATE TO MR S DIER
		A serving director/secretary etc must sign the form below.
* Voluntary details † Directors only.	s. Signed	Date 2-4-96.
		(by a serving director / secretary / administrator / administrative receiver / receiver manager / receiver
	he name, address	R Nixon
telephone number and, if available, a DX number and exchange of		NWS HOUSE CITY ROAD
	ompanies House should ere is any query	CHESTER X CH99 3AN Tel 01244 693078

DX number

Registrar of Companies at:

for companies registered in Scotland

DX exchange

DX 33050 Cardiff

DX 235 Edinburgh

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

Companies House, Crown Way, Cardiff, CF4 3UZ for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

COMPANIES HOUSE 04/04/96
Form revised March 1995