

Please complete in typescript, or in bold black capitals

288b

Resignation of director or secretary

	Company Number	1795572			
C	company Name in full	ACT MEDISYS	LIMITED		
* F288	BD40 *				
Resignation					
form		Day Month	Year		•
	Date of resignation	01 03	96		
	Resignation as director	χ as secretary		Please mark the appro is as a director and se	priate box. If resignation cretary mark both boxes.
	NAME *Style / Title	Mr		*Honours etc	
Please insert details as	Forename(s)	Phillip Will	iam		
previously notified to Companies Hous	Surname se.	Bell			
		Day Month	Year		
	† Date of Birth	03. 11	59		
If cessation is other than resignation, please state reason		-			·
		A serving directo	or, secretary	etc must sign the	form below

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

* Voluntary details. † Directors only.

	(by a serving director / secretary / adm	ninistrator / ad ministrativo receiv er / re ceiver manage r / r eceive r	
	Z V Durrant		
Burleigh House Chapel Oak			
	SALFORD PRIORS WR1	el 01386-871373	
	DX number [X exchange	

Date

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

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh