

Please complete in typescript, or in bold black capitals.

Resignation of director or secretary

	Company Nun	nber 2523224			
Co	ompany Name ir	PARKLANDS AREA (VII) MANAGEMENT COMPANY (CROXTETH) LIMITED			
÷F288	B019*				
tesignation orm	Date of resign	ation Day Month Year			
	Resignation as di	Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.			
	NAME *Style	Title MR *Honours etc			
Please insert letails as	Forena	me(s) GEOFFREY ALAN			
oreviously notified to		name DEAN			
Companies Hous	†Date o	Day Month Year F Birth 22 08 50			
If cessation is other than resignation, please state reason		eason			
		A serving director, secretary etc must sign the form below.			

* 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.

Signed



Form revised March 1995

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M	km	Date	10.04.97

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

CPM NORTH	ERN		
2 WEST ROAD		NORTHWICH	
CHESHIRE CW8 3HQ	Tel		
DX number	DX exchang	ge	

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