

Please complete in typescript, or in bold black capitals.

## **CHANGE OF PARTICULARS for director**

or secretary/NOT for appointment (use Form

			288a) or resignation (use Form 288b))			
	Comp	any Number	3386093			
Company Name in full			CARMARTHEN WOMENS ALD CTD.			
*F 2 8 8 C 0 1 A *				Day	Month	Year
Changes of particulars	Comple	ete in all cases	Date of change of particulars	24	9	98
form	Name	*Style / Title		*Hono	urs etc	
		Forename(s)	PETERS AMANDA			
Surname † Date of Birth			APPEAR PETERS			
			Day Month Year  14 6 62			
Change of name (	enter new na	ame) Forename(s)				
		Surname				
Change of usual residential address (enter new address)			Green Hall, Parc yr Afon			
		Post town	Carmarthen			
	,	County / Region	Carmarthenshire	- 1	Postco	de \$431 (RL
		Country	WALES		-	
Other change	(please specify)					
			A serving director, secretary etc must sign the form below.			
		Cianad			Dot	Clinica

\* Voluntary details.

† Directors only.

Signed

H. Darling tin

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

Sally Greiner. SA32ER Tel 01267 2347 25 DX number DX exchange

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



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