



Please complete in typescript,
or in bold black capitals.

CHWP000

288c

**CHANGE OF PARTICULARS for director
or secretary (NOT for appointment (use Form
288a) or resignation (use Form 288b))**

Company Number

4394020

Company Name in full

COX MEDICAL SERVICES LIMITED

**Changes of
particulars
form**

Complete in all cases

Date of change of particulars

Day Month Year

21 03 2003

Name

*Style / Title

DR.

*Honours etc

MBBS MRCP

Forename(s)

MARK

Surname

COX

Day Month Year

† Date of Birth

19 05 1963

Change of name (enter new name) Forename(s)

Surname

Change of usual residential address
(enter new address)

50 MIRFIELD ROAD

Post town

SOLIHULL

County / Region

WEST MIDLANDS

Postcode

B91 1JD

Country

U.K.

Other change

(please specify)

A serving director, secretary etc must sign the form below.

Signed

[Signature]

Date

16/6/03

** director / secretary / administrator / administrative receiver / receiver manager / receiver

* Voluntary details.

† Directors only.

**Delete as appropriate.

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.

GARRATT

29 WATERLOO ROAD WOLVERHAMPTON

WV1 4DS

Tel 01902 773658.

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, CF14 3UZ DX 33050 Cardiff

for companies registered in England and Wales or

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

for companies registered in Scotland

DX 235 Edinburgh

