Printed and supplied by

JORDANS

21 St Thomas Street Bristol BS1 6JS Telephone: 0117 923 0600 Fax: 0117 923 0063

Please complete in typescript, or in bold black capitals.

288b

Resignation of director or secretary

Company Number			5C01	13599.						
Company Name in full			CAIRNGORM CHAIRLIFT COMPANY LIMITED.							
		\{						• • • • • • • • • • • • • • • • • • •		
Resignation form	Date of resignation		Day 25	Month 8	Year 95					
	Resignation as director		✓	as seci	etary				riate box. If resigna retary mark both bo.	
	NAME	*Style / Title					*Honours	etc		
Please insert details as previously notified to Companies Hou		Forename(s)	MICHAEL							
	se.	Surname	HOLTON							
		†Date of Birth	Day 30	Month 9	Year					
If cess resign				'						
			A servi	ng direc	tor, sec	retar	y etc must	sign the	form below.	
Signed * Voluntary details.			se sho					Date	11/8/95	
Please give t telephone num a DX number the person Concontact if there	ber and, if r and Exc npanies Ho	available, change of buse should	(by a serv	ing director	/ seerctary	/ admir		iotrativo rec	eiver / rosoiver mana	ger+ receive
	DX number DX exchange									
SCT * COMPANIE	When y Registr Compa for com	you have ar of Cor anies Ho apanies re	npanies use, Cre egistere use, 37	ted ar at: own \ d in E Cast	nd signed the Way, Cardingland and le Terrace,	ne form pl	or gh, EH1 2EB			