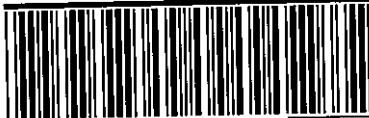




COMPANIE



A05 \*ACY2DDM\* 306  
COMPANIES HOUSE 25/07/95

# 288

## Change of director or secretary or change of particulars.

This form should be completed in black.

Company number

CN

2050550

Company name

FAIRWAY CARE LTD

### Appointment

Turn over page  
for resignation  
and change of  
particulars.)

Date of appointment

|    |     |       |      |
|----|-----|-------|------|
| DA | Day | Month | Year |
|    |     |       |      |

Appointment of director

CD

Appointment of secretary

CS

Please mark the appropriate box.  
If appointment is as a director and secretary  
mark both boxes.

Name \*Style/title

Forenames

Surname

\*Honours etc

Previous forenames

Previous surname

Usual residential address

AD

Post town

County/region

Postcode

Country

Date of birth<sup>†</sup>

|    |  |  |  |  |
|----|--|--|--|--|
| DO |  |  |  |  |
|----|--|--|--|--|

Nationality<sup>†</sup>

NA

Business occupation<sup>†</sup>

OC

Other directorships<sup>†</sup>

### NOTES

Show the full forenames. NOT INITIALS.  
If the director or secretary is a  
Corporation or Scottish firm, show  
the name on sumame line and  
registered or principal office on the  
usual residential address line.

Give previous forenames or surname  
except:

- for a married woman the name before  
marriage need not be given.
- for names not used since the age of 18  
or for at least 20 years.

A peer or individual known by a title may  
state the title instead of or in addition to  
the forenames and surname.

### Other directorships.

Give the name of every company  
incorporated in Great Britain of which  
the person concerned is a director or  
has been a director at any time in the  
past 5 years. Exclude a company  
which either is, or at all times during  
the past 5 years when the person  
was a director, was  
- dormant  
- a parent company which wholly  
owned the company making the  
return  
- a wholly owned subsidiary of the  
company making the return  
- another wholly owned subsidiary of  
the same parent company.

Consent signature

Signed

Date

I consent to act as director/secretary of the above named company

\*Voluntary details    †Directors only

A serving director etc must also sign the form overleaf.

## Resignation

(This includes any form of ceasing to hold office e.g. death or removal from office.)

Date of resignation etc  
 Resignation etc, as director  
 Resignation etc, as secretary

Forenames

Surname

Date of birth (directors only)

If cessation is other than resignation, please state reason (eg death)

|  |                                     |   |   |   |   |   |
|--|-------------------------------------|---|---|---|---|---|
| DR   | 2                                   | 7 | 0 | 3 | 9 | 5 |
| XD   | <input checked="" type="checkbox"/> |   |   |   |   |   |
| XS   | <input type="checkbox"/>            |   |   |   |   |   |
| Please mark the appropriate box.<br>If resignation etc is as a director and secretary mark both boxes. |                                     |   |   |   |   |   |
| FRANCIS DANIEL   |                                     |   |   |   |   |   |
| CORFE  |                                     |   |   |   |   |   |
| DO   | 0                                   | 3 | 0 | 1 | 3 | 9 |

## Change of particulars (this section is not for appointments or resignations).

Complete this section in all cases where particulars of a serving director/secretary, have changed and then the appropriate section below.

Date of change of particulars  
 Change of particulars, as director  
 Change of particulars, as secretary  
 Forenames } (name previously notified to Companies House)  
 Surname }  
 Date of birth (directors only)

|  |                          |                          |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| DC   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ZD   | <input type="checkbox"/> |                          |                          |                          |                          |
| ZS   | <input type="checkbox"/> |                          |                          |                          |                          |
| Please mark the appropriate box.<br>If change of particulars is as a director and secretary mark both boxes. |                          |                          |                          |                          |                          |
| DO   |                          |                          |                          |                          |                          |
| NN   |                          |                          |                          |                          |                          |
| AD   |                          |                          |                          |                          |                          |
| Post town  |                          |                          |                          |                          |                          |
| County/region  |                          |                          |                          |                          |                          |
| Postcode   |                          |                          |                          |                          |                          |
| Country  |                          |                          |                          |                          |                          |

Change of name (enter new name)

Forenames

Surname

Change of usual residential address (enter new address)

Post town

County/region

Postcode

Country

Other change

(please specify)

A serving director etc must also sign the form overleaf

Signature

Signed

*Guy Faron*

Date

27/3/95

(by a serving director/secretary/administrator/  
 administrative receiver/receiver). (Delete as appropriate)

After signing please return the form to the Registrar of Companies at

or

Companies House, Crown Way, Cardiff CF4 3UZ  
 for companies registered in England and Wales  
 Companies House, 100-102 George Street, Edinburgh EH2 3DJ  
 for companies registered in Scotland.

To whom should Companies House direct any enquiries about the information on this form?

GUY FARON  
 73 VILLAGE ROAD HUYER BEBINGTON  
 WIRRAL L63 9PS Tel: 0151 608 1115