

19
296**Change of director or secretary
or change of particulars****This form should be completed in black**

Company number

CN

N136140

Company name

400 T. PRINTS. WOMEN'S CENTRE LTD
UNIT 21, DAWSON ROAD, DUBLIN 15**Appointment**(Turn over page
for resignation
and change of
particulars).

Date of appointment

Appointment of director

Appointment of secretary

NOTES

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

Name

*Style/Title

Forenames

Surname

*Honours etc.

Previous forenames

Previous surname

Usual residential address

Post town

County/Region

Other directorships

Postcode

Date of birth †

Business occupation †

Other directorships †

Give the name of every
company 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 five years when the person was a director,
was

- dormant
- a parent company which
wholly owned the
company making the
return
- a wholly subsidiary of the
company making the
return
- another wholly owned
subsidiary of the same
parent company.

Consent signature

DA

CD

CS

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

MRS.

BERNADETTE

CREANEY.

HEDDLEY

MOONEY

AD

4 LAGMORE DOWNS

STEWARTSTOWN ROAD

BELFAST 17

DUBLIN 15

County

DUBLIN

DO 29 11 15

Nationality†

NA

IRISH

OC

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

Signed

Bernadette Creaney 4/9/00

A serving director etc. must also sign the form overleaf.

*Voluntary details

† Directors only

7 NOV 2000

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

Surnames

Date of birth (directors only)

If cessation is other than resignation, please state reason (e.g. death)

CHANGE OF PARTICULARS

Complete this section in all cases where particulars 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 Registry)
Surname }

Date of birth (directors only)

Change of name (enter new name)

Forenames

Surname

Change of usual residential address (enter new address)

Post town

County/Region

Postcode

Other Change

(please specify)

DR

XD

XS

Please mark the appropriate box.
If resignation etc. is as director and secretary mark both boxes

DO

DC

ZD

ZS

Please mark the appropriate box.
If change of particulars etc. is as director and secretary mark both boxes

DO

NN

AD

A serving director/secretary etc. must also sign the form below

Signature

Signed L. Smyth Date 17/10/00
(by a serving director/secretary/administrator/
administrative receiver). (Delete as appropriate)

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

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

IDB House
64 Chichester Street, Belfast BT1 4JX

Tel: _____

20
296Change of director or secretary
or change of particulars

This form should be completed in black

Company number

CN

NI 36140

Company name

FOOT PRINTS WOMEN'S CENTRE LTD
UNIT 21, DAIRY FARM CENTRE

Appointment

(Turn over page
for resignation
and change of
particulars).

Date of appointment

Appointment of director

Appointment of secretary

NOTES

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

Name

*Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Usual residential address

Post town

County/Region

Postcode

Date of birth †

Business occupation †

Other directorships †

Other directorships

Give the name of every
company 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 five years when the person was a director,
was

- dormant
- a parent company which
wholly owned the
company making the
return
- a wholly subsidiary of the
company making the
return
- another wholly owned
subsidiary of the same
parent company

Consent signature

DA

CD

CS

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

Miss

ELLEN

MC ILHAFF

AD 251 LAUREL BANK

POLEGLASS

BELFAST

AN TRIM

BT17 0RT

County

DO 014 01 63

Nationality NA IRISH

OC

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

Signed

ELLEN MC ILHAFF

Date 11-9-00

*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
Surnames
Date of birth (directors only)

If cessation is other than resignation, please state reason (e.g. death)

CHANGE OF PARTICULARS

Complete this section in all cases where particulars 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 Registry)
Surname }
Date of birth (directors only)

Change of name (enter new name)

Forenames

Surname

Change of usual residential address (enter new address)

Post town

County/Region

Postcode

Other Change

(please specify)

DR					
XD					
XS					

Please mark the appropriate box.
If resignation etc. is as director and secretary mark both boxes

Forenames _____

Surnames _____

DO

DO					
----	--	--	--	--	--

DC					
ZD					
ZS					

Please mark the appropriate box.
If change of particulars etc. is as director and secretary mark both boxes

Forenames _____

Surnames _____

DO

DO					
----	--	--	--	--	--

NN

AD

Country _____

A serving director/secretary etc. must also sign the form below

X
Signature

Signed A. Smith Date 17/10/00
(by a serving director/secretary/administrator/
administrative receiver). (Delete as appropriate)

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

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enquiries about the information on this form?

IDB House
64 Chichester Street Belfast BT1 4JX

Tel: _____