

Please complete in typescript, or in hold black capitals

CHANGE OF PARTICULARS for director

or in bold black capitals CHFP000		288a) or resignation (use Form 288b))		
Company Number Company Name in full		2493994		,,
		LEISURE E NOVATIONS LIMITED		
Changes of particulars	Complete in all cases		Day Month	Year 0 2
•	lame *Style / Title	*Ho	onours etc	
	Forename(s)	DAVID JOHN		
	Surname	HOWELC Day Month Year		
	† Date of Birth	13111951		
Change of name (enter new name) Forename(s)				
	Surname			
Change of usual residential address ††		9 ST PETERS STREET		
† Tick this box if the	Post town	MARCOW		
address shown is a service address for he beneficiary of a Confidentiality Order granted under the provisions of section	County / Region Country	BUCUS ENGLAND	Postcode	SCT INQ
/23B of the Companies Act 1985	Other change (please specify)	A serving director, secretary etc	must sign the f	orm helow.
* Voluntary details † Directors only **Delete as appropriate	Signed	Mowell	Date	4/10/2007
You do not have information in the body in the body it will help Compyou if there is a que contact information	n that you give will be	(** director / secretary / administrator / administr	rative receiver / receiv	er manager / receiver)
AVEKVUUM		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

DX 235 Edinburgh

for companies registered in Scotland

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21/11/2007

COMPANIES HOUSE