

**Company Number** 

Please complete in typescript, or in bold black capitals.

## 288b

## Resignation of director or secretary

Co * F 2 8 8	ompany Name in full	AGCO LIMITED
Resignation form	Date of resignation	Day Month Year  09 01 98  X as secretary Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
	NAME *Style / Title	Mr *Honours etc
	Forename(s)  Surname  te.  †Date of Birth  ation is other than ation, please state reason	David Ivor  Franklin  Day Month Year  09 10 40

509133

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

Signed

Date

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.



Form revised March 1995

\* Voluntary details. † Directors only.

Mr J B Parkin, Company Secretary				
AGCO Limited,	PO BOX 62, Banner Lane, Coventry			
CV4 9GF	Tel <sub>01203</sub> 851234			
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, CF4 3UZ DX 33050 Cardiff for companies registered in England and Wales

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

for companies registered in Scotland

DX 235 Edinburgh