



288b

Please complete in typescript,
or in bold black capitals.

Resignation of director or secretary

Company Number

3612332

Company Name in full

GRAHAM COCKSEY ASSOCIATES
LIMITED



Resignation form

Date of resignation

Day Month Year
10 8 98

Resignation as director

☐

as secretary

☒

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

NAME *Style / Title

MR.

*Honours etc

Please insert
details as
previously
notified to
Companies House.

Forename(s)

HAROLD

Surname

WAYNE

†Date of Birth

Day Month Year

If cessation is other than
resignation, please state reason

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

Signed

[Signature]

Date

10-8-98

(by a serving director / secretary / administrator / administrative receiver / receiver manager / receiver)

* Voluntary details.
† Directors only.

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

Tel	
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 or
Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB
for companies registered in Scotland DX 235 Edinburgh