

Please complete in typescript, or in bold black capitals.

288a

APPOINTMENT of director or secretary (NOT for resignation (use Form 288b) or change of particulars (use Form 288c))

CHFP000		of particulars (use Form 288c))						
Company Number Company Name in full		3991852						
		D. C.A. ACCOUNTANCY LIMITED						
Appointment Alform NA Notes on completion appear on reverse.	*Style / Title Forename(s) Surname Previous Forename(s)	Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day Month Year Day M						
	Usual residential address	29 TUDOR WAY						
	Post town	WICKFORD Postcode SS12 OHS						
	County / Region	ESSE× Country						
	[†] Nationality	BRITISH †Business occupation SECRETAR!						
†Other directorships (additional space overleaf) Consent signature		I consent to act as ** director / secretary of the above named company Date 16 5 0 0						
* Voluntary details. † Directors only. **Delete as appropriate	Signed	A director, secretary etc must sign the form below. 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.		(**a director / secretary / administrator / administrative receiver / receiver manager / receiver) D. C. A. ACCOUNTANCY LIMITED M.K. M. HOUSE, 6-16 BARON ROAD SOUTH WOODWAM FERRERS.						
		DX number DX exchange						

COMPANIES HOUSE
Form revised July 1998

19/05/00

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House Crown Way Cardiff CF4 317 DX 33050 Cr

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

	Company Number			1	i •
† Directors only.	[†] Other directorships				

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 line.

Give previous forenames or surname(s) except:

- for a married woman, the name by which she was known 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 and need not give the name by which that person was known before he or she adopted the title or succeeded to it.

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 five years.

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

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