

Please complete in typescript, or in bold black capitals.

16 6525 x 35 363a

## **Annual Return**

Company Number | 716242

Company Name in full

FOSTER PHARMACEUTICALS LIMITED		

\* F363AD40 \*

Date of this return (See note 1) The information in this return is made up to

Date of next return(See note 2) If you wish to make your next return to a date earlier than the anniversary of this return please show the date here. Companies House will then send a form at the appropriate time.

Day	Month	Year
01	03	1999

Day Month Year 01 03 2000

Registered Office(See note 3) Show here the address at the date of this return.

Any change of registered office must be notified on form 287.

Post town

County / Region

Postcode

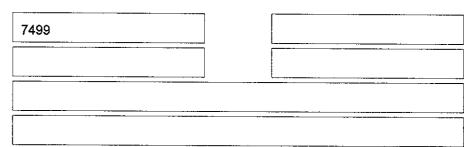
SAPPHIRE COURT	
WALSGRAVE TRIANGLE	
COVENTRY	
CV2 2TX	

## Principal business activities

(See note 4)

Show trade classification code number(s) for the principal activity or activities.

If the code number cannot be determined. give a brief description of principal activity.





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 or companies registered in England and Wales

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

Register of a	mbers is not	kept at the				
registered office, st	ate here whe	ere it is kept.				
		Post town				
	C	ounty / Region			Postcode	
Register of I (See note 6) If there is a register and it is not kept at state here where it	of debenture the registere	e holders				
		Post town				
	C	ounty / Region			Postcode	
Company ty	<b>pe</b> (See no	te 7)				
Public limited compan	у					
Private company limite	ed by shares		X			
Private company limite share capital	ed by guarante	e without				
Private company limite section 30	ed by shares e	xempt under	Please mark the appropriate box			
Private company limite under section 30	ed by guarante	e exempt				
Private unlimited comp	oany with shar	e capital				
Private unlimited comp	pany without s	hare capital				
Company Se	ecretary	(see notes 1-5)	Details of a new compa	any secretary	/ must be notific	ed on form 288a.
(Please photocopy this area to provide details of joint	Name	* Style / Title	MR		*Honours etc	ACIS
secretaries).		Forename(s)	JOHN RICHARD BRIDGE			
* Voluntary details.		Surname	DAVIES			
·	Previou	us forename(s)				
	Previo	us surname(s)				
	Address		AMBERLEY			
Usual residential		5 PRIMROSE HILL, WASTE LANE				
address must be given. In the case		Post town	KELSALL			
corporation, give the registered or principal County / Region office address.			On CHESHIRE Postcode CW6 0PE			
omee audiess.		Country				

Directors (see notes 1 to		Details of new directors must be notified on form 288a					
Please list directors in al	•	MR	7				
Name	* Style / Title			Day	Month	Year	
	* Honours etc	FCIS	Date of birth	23	12	1952	
	Forename(s)	GRAHAM ANTHONY					
	Surname	KERSHAW					
Pre	evious forename(s)						
Pr	evious surname(s)			·····			
Address	s	SELSLEY HOUSE, WESTI	HORPE	<b>/</b>			
Usual residential							
address must be given. In the case of a corporation, give the	Post town	SIBBERTOFT					
registered or principal office address.	County / Region	LEICESTERSHIRE	Postcode	LE16 9	LE16 9UL		
	Country	ENGLAND	Nationality	BRITIS	SH		
Busines	ss occupation	DIRECTOR					
Other d	irectorships	See attached list					
* Voluntary details.							
·							
Name	* Style / Title	MR		Day	Month	Year	
	* Honours etc		Date of birth	12	01	1959	
	Forename(s)	GERHARD VIKTOR					
	Surname	MISCHKE					
Pre	evious forename(s)						
Pro	evious surname(s)						
Address	s	WHITEHILL FARMHOUSE	, ALDERMINSTER				
Usual residential							
address must be given. In the case of a corporation, give the	Post town	STRATFORD-ON-AVON					
registered or principal office address.	County / Region	WARWICKSHIRE	Postcode	CV37 8	3BW		
	Country	ENGLAND	Nationality	GERM	ANY		
Busines	ss occupation	CHIEF FINANCE OFFICER					
Other d	irectorships	NO OTHER DIRECTORSH	IIPS				
		···					

			Details of new directo	rs must be notified	on form	288a.		
Please list directors in alphabetical order		MR						
N	lame	* Style / Title	10/12		ſ	Day	Month	Year
		* Honours etc	FCA	Date	of birth	21	01	1946
		Foreneme(s)	RONALD CHARLES HARC	DLD				
		Surname	VIZARD					
	Prev	rious forename(s)						
	F	Previous surname				···		
A	ddress		FIELDFARE, PIGEON GRI	EEN				
Usual residenti	ial		SNITTERFIELD					
address must be given. In the case		Post town	STRATFORD-UPON-AVO	N				
corporation, give t registered or princ	the cipal	County / Region	WARWICKSHIRE	I	Postcode	CV37	OLP	
office address.		Country	ENGLAND					
N	lational	ity	BRITISH					
E	Busines	s occupation	CHARTERED ACCOUNTA	NT				
C	Other di	rectorships	NO OTHER DIRECTORSH	IIPS				_
				7		•		
N	lame	* Style / Title			ſ	Day	Month	Year
		* Honours etc		Date	of birth			
		Forename(s)						
		Surname						
	Prev	ious forename(s)						
	F	Previous surname						
A	\ddress							
Usual residenti address must be given. In the case	Э	Post town			<del></del>			
corporation, give t registered or princ	the	County / Region		ſ	Postcode			
office address.	•	Country						
N	lational	ity						
B	Busines	s occupation						
		rectorships						
* Voluntary details.								

•	Other relevant directorships
Company Number	
Company Name	FOSTER PHARMACEUTICALS LIMITED
Directors Name	KERSHAW GRAHAM ANTHONY
† Directors only. † Other directorships	FIRTH & PILLING LIMITED
	M. L. & E. MIDGLEY LIMITED
NOTES	PRINTZ LIMITED
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.	THE LEEDS CHAMBER OF COMMERCE AND INDUSTRY
- for names not used since the age of 18 or for at least 20 years	THE MID YORKS. CHAMBER OF COMMERCE & IND. (TRAINING) LTD
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 preceded to it.	THE MID YORKSHIRE CHAMBER OF COMMERCE AND INDUSTRY LIMITED
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.	

Issued share capital (see note 9) Enter details of all the shares in issue at the date of this return.	(e.g. Ordinary/Preference)	Number of shares issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share)
	ORDINARY £1	500	£ 500.00
	Totals	500	£ 500.00
List of past and present members (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two	There were no changes	·	
returns. (see note 10)	A list of changes is enclo	on paper	in another format
	A full list of members is	enclosed X	
Elective resolutions (Private companies only) (See note 11)	If at the date of this retur	n an election is in force t annual general meeting	
		rn an election is in force to nunts in general meetings	
Certificate	I certify that the informat knowledge and belief.	ion given in this return is	true to the best of my
Signed † Please delete as appropriate.	† a director/secretary	pate	10/3/99
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House.	This return includes	co (enter number)	entinuation sheets.
Please give the name, address, telephone number, and if available, a DX number and Exchange, for	MISS J R HEATON, AAH PLC, SA	PPHIRE COURT, WALSGRAVE TRI	ANGLE, COVENTRY, WARWICKSHIRE,
the person Companies House should contact if there is any query.	CV2 2TX	Tel 01203 432440	
	DX number	DX exchange	



Please complete in typescript, or in bold black capitals.

## List of past and present members Schedule to form 363a, 363b

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Company Number	716242
Company Name in full	FOSTER PHARMACEUTICALS LIMITED
Name and address	Number of shares Particulars of shares or stock transferred since or amount of the date of the last return (or in the case of the stock held by first return, since the incorporation of the existing members company) by at date of this (a) persons who are still members, and return. (b) persons who have ceased to be members.  Number or Number or Date of amount amount registration currently held Transferred of transfer
FOSTER & PLUMPTON GROUP LIMITED SAPPHIRE COURT, WALSGRAVE TRIANGLE, COVENTRY, CV2 2TX, ENGLAND	ORDINARY £1 499
AAH NOMINEES LIMITED SAPPHIRE COURT, WALSGRAVE TRIANGLE, COVENTRY, CV2 2TX, ENGLAND	ORDINARY £1