

Please complete in typescript,

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

288a

| or | in | bold | black | capitals | - | |
|----|----|------|-------|----------|---|--|
| | | | | | | |

| CHEDOO | | | | | of _i | part | icula | ars (u | se Fo | orm 2 | ?88c) |) | | | | |
|--|----------------|---------------------------|--|--|-----------------|----------|---------|----------|-------------------|----------------------------|--|---------|--------|-----|---|--|
| CHFP029 | Cor | npany Number | 1183615 | | | | | | | | | | | | | |
| Company Name in full | | | | Exel Nominee No 2 Limited | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | D -1(| Day | Mont | h | Year | | · 40 | _11 | Day | Month | 1 | Yea | r | | |
| Appointme | nt | Date of appointment | 0 5 | 0 4 | 1 2 | 10 10 | 2 | | ate of irth | 2 3 | 0 6 | 1 | 9 | 6 8 | 8 | |
| form | | intment as director | X as secretary Please mark the as a director and | | | | | | | e mark the lirector and | e appropriate box. If appointment is d secretary mark both boxes. | | | | | |
| Notes on completio | NAME n | *Style / Title | MS *Honours etc | | | | | | | | | | | | | |
| appear on reverse. | | Forename(s) | STEPHANIE HELEN | | | | | | | | | | | | | |
| | Surname COFFEY | | | | | | | | | | | | | | | |
| | | Previous Forename(s) | | | | | | | revious name(s | | | | | | | |
| | | Usual residential address | | | | | | | | | | | | | | |
| Post town County / Region †Nationality †Other directorships (additional space overleaf) | | | | READING | | | | | Po | stcode | RG4 8 | HN | | | | |
| | | | | BERKSHIRE | | | | | | Country | ENGL | AND | | | | |
| | | | | BRITISH †Busines | | | | | | CHARTERED SECRETARY | | | | | | |
| | | | | ·) | | | | | | | | | | | | |
| | | | | l consent to act as ** director / secretary of the above named company | | | | | | | | | | | | |
| | Cor | nsent signature | | ر م | 1994 | offe | 7 | | | Date | 05/ | 04/ | 200 | 2 | | |
| * Voluntary details. † Directors only. | | | A divertor secretary escimust sign the form below. | | | | | | | | | | | | | |
| **Delete as appropria | te | Signed | | Du | <u>è (</u> | M | m | | | Date | 8 | 4/ | 200 | 20 | • | |
| | | | (** a direc | eter / sec | retary / t | administ | "AUM | drised's | ignator | gceiver n | nanager / r | eccive | *) | | | |
| Please give the name, address, telephone number and, if available, a DX number and Exchange of | | | MATT ARMITAGE, OCEAN HOUSE, THE RING, BRACKNELL, BERKSHIRE, RG12 1AN | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| the person Con contact if there | | | Tel 01344 744235 | | | | | | | | | | | | | |
| | | | DX nu | ımber | | | | DX ex | chang | е | | | | | | |
| | | | When | you h | ave c | omple | eted ar | nd signe | d the fo | rm ple | ase ser | nd it 1 | o the |) | | |

Registrar of Companies at:

for companies registered in Scotland

Companies House, Crown Way, Cardiff, CF14 3UZ

for companies registered in England and Wales or

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

DX 33050 Cardiff

DX 235 Edinburgh

COMPANIES HOUSE ronn revised July 1998 09/04/02

| , | Company Number | 1183615 |
|--|---|---------|
| Directors only. | † Other directorships | |
| | | |
| | | · |
| | | |
| NOTES | NOT INITIAL C. If the director | |
| or secretary is a corporati | NOT INITIALS. If the director ion or Scottish firm, show the d registered or principal office ne. | |
| Rive previous forenames for a married woman, the known before marriage i | e name by which she was | |
| for names not used sind least 20 years | e the age of 18 or for at | |
| nstead of or in addition to and need not give the nar | n by a title may state the title o the forenames and surname me by which that person was dopted the title or succeeded | |
| Other director | rshins | |
| Give the name of every or Britain of which the perso | ompany incorporated in Great n concerned is a director or y time in the past five years. | |
| ou may exclude a comp imes during the past five | any which either is, or at all years when the person | |
| concerned was a director dormant | , was | |
| a parent company which making the return, or | n wholly owned the company | |
| another wholly owned s | ubsidiary of the same parent | |
| company. | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |