

## 288a

## **APPOINTMENT** of director or secretary

(NOT for resignation (use Form 288b) or

|  |   | cha   | ange d   | of partie | cula | rs (ı | use Forn | 1 288                  | c))  |       |            |  |
|--|---|---|--|-----------|------|-------|----------|------------------------|--|-------|------------|--|
|  | 1423  | 001   |  |           |      |       |          |                        |  |       |            |  |
| С  | ompany Name in full                                 | INTE  | RCAPI  | TAL PLO   | ;    |       | . 723    |                        | •  |       |            |  |
| * F 2 8 8  | , ,,4, =1,4, ==1) ;4=1                              | te of<br>ment   | Day<br><b>01</b>   | Month     | T    | ear   | †Date of | Birth                  | Day <b>08</b>  | Month | Year<br>58 |  |
|  | Appointment as director                             | as secretary Please mark the                                  |  |           |      |       |          |                        | appropriate box. If appointment is as accretary mark both boxes. |       |            |  |
| Appointment<br>form  | NAME *Style / Title                                 | *Honours  |  |           |      |       |          | ırs etc                |  |       |            |  |
|  | Forename(s)   | JONATHAN QUINTIN  |  |           |      |       |          |                        |  |       |            |  |
| Notes on completion appear on reverse.   | Surname   | ROBSON  |  |           |      |       |          |                        |  |       |            |  |
|  | Previous<br>Forename(s)<br>Previous                 |   |  |           |      |       |          |                        |  |       |            |  |
| Surname<br>Usual residential<br>address  |   |   | 25 BROAD STREET  |           |      |       |          |                        |  |       |            |  |
|  | Post town   | NEW Y   | ORK  |           |      |       | Postcod  | e                      |  |       |            |  |
|  | County / Region                                     | NY 10004 Country  |  |           |      |       | USA      |                        |  |       |            |  |
|  | † Nationality                                       | BRITIS  | †Business occupation   |           |      |       | CHIEF    | HIEF EXECUTIVE OFFICER |  |       |            |  |
|  | † Other directorships [ (additional space overleaf) | None I consent to act as director / secretary of the above na |  |           |      |       |          |                        | compan   |       |            |  |
| Voluntary details. Directors only.   | Consent Signature                                   |   | J-18   | M.        | ~    |       |          | Da                     | te 「   | , 12, | 78         |  |
| ** Please delete as appropriate Signed   |   |   | A director, secretary etc must sign the form below.  Date    Dulube     Company      |           |      |       |          |                        |  |       |            |  |
| Please give the name, address, elephone number and, if available, a DX number and Exchange of he person Companies House should contact if there is any query |   |   | Miss K M Lorenzen Intercapital Plc Sherborne House 119 Cannon Street London EC4N 5AT |           |      |       |          |                        |  |       |            |  |
|  |   |   |  |           |      | _     |          |                        |  |       |            |  |

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When you have completed and signed the form please send it to 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   | 1423001 |
|--|---------|
| Directors only. † Other directorships  | None    |
|  |         |
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|  |         |
| NOTES  |         |
| Show the full forenames, NOT INITIALS. If he director or secretary is a corporation or Scottish firm, show the name on surname ine 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             |         |
| vas known before he or she adopted the itle 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.   |         |
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