

363a

Please complete in typescript, or in bold black capitals.

Annual Return

730347/300

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CHFP029	Company Number	1993871
	Company Name in full	Seton Healthcare Limited
Date of th	is return n in this return is made up to	Day Month Year 2 5 0 8 2 0 0 4
to a date earl of this return	make your next return ier than the anniversary please show the date here. louse will then send a form	Day Month Year 2 5 / 0 8 / 2 0 0 5
Registered Show here the this return.	d Office e address at the date of	35 New Bridge Street
Any change of registered of must be notion form 287.	ice Tost town	London LEC4V 6BW
Principal I	ousiness activities	
	lassification code number(s) pal activity or activities.	7499
	imber cannot be determined, escription of principal activity.	<u> </u>



Form April 2002

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

Companies House, Crown Way, Cardiff, CF14 3UZ for companies registered in England and Wales

DX 33050 Cardiff

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh for companies registered in Scotland Page 1

Register of members		
If the register of members is registered office, state here		
registered office, state fiere	Witere it is kept.	
	Post town	
C	County / Region	UK Postcode
Register of Debenture If there is a register of deber or a duplicate of any such re of it, which is not kept at the office, state here where it is	nture holders, egister or part registered	UK Postcode
Company type		
Public limited company		~
Private company limited by sh	ares	
Private company limited by gu share capital	arantee without	
Private company limited by sha	ares exempt unde	Please tick the appropriate box
Private company limited by gu under section 30	arantee exempt	
Private unlimited company with	h share capital	
Private unlimited company with	hout share capital	
Company Secretary		Details of a new company secretary must be notified on form 288a.
* Voluntary details		
(Please photocopy this area to provide details of joint sec-	* Style / Title	
retaries).	Forename(s)	Jonathan David
##Tick this box if the address shown is a service address for	Surname	JOWETT
the beneficiary of a Confidentiality Order	Address ††	43 Armistead Way
granted under section 723B of the Companies Act 1985		Cranage
otherwise, give your usual residential	Post town	Crewe
address. In the case of a corporation, or Scottish firm, give the	County / Region	Cheshire
registered or principal office address	Country	England
If a partnership give the names and addresses of the partners or the name of the partnership and office address.	·	

Directors Please list directors in all	phabeti	ical order.	Details of new directors mus	st be notified or	n form 288a	
N	lame	* Style / Title	1			
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corpo-		Date of Birth	Day Month Year 3 1 / 0 1 / 1 9 5	<u>8</u>		
rate or firm name.		Forename(s)	Shaun Kevin			
th Tick this box if the address shown is a service address for		Surname	DAVIS			
the beneficiary of a Confidentiality Order granted under section	П	Address ^{††}	Mekoda			
723B of the Companies Act 1985 otherwise, give your	_		Sundon Road			
usual residential address. In the case		Post town	Houghton Regis	<u> </u>		
of a corporation, or Scottish firm, give the registered or principal		County / Region	Beds	UK Postcode	L U 5 L	5 N F
office address		Country	England	Nationality	British	
	Busi	ness occupation	Director			
* Voluntary details.	ame	* Style / Title	1.84.			
Directors In the case of a director that		O.,	Mr North Year			
is a corporation or a Scottish firm, the name is the corpo-		Date of Birth	Day Month Year 2 3 / 0 4 / 1 9 6	0		
rate or firm name.		Forename(s)	Mark			
tt Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section		Surname	Moran			
		Address ^{††}	25A Westcar Lane			
723B of the Companies Act 1985 otherwise, give your			<u></u>			·
usual residential address. In the case		Post town	Walton On Thames			
of a corporation, or Scottish firm, give the registered or principal		County / Region	Surrey	UK Postcode	K T 1 2	5 E R
office address		Country	England	Nationality	British	

Group Finance Director

Business occupation

Directors Please list directors in al	ohabeti	cal order.	Details of new directors mus	t be notified o	n form 288a	
	lame	* Style / Title	ł.			
Directors In the case of a director that			Day Month Year	<u> </u>		
is a corporation or a Scottish firm, the name is the corpo- rate or firm name.		Date of Birth		2		
++Tink ship have if ship		Forename(s)	Jonathan David			
††Tick this box if the address shown is a service address for		Surname	JOWETT			
the beneficiary of a Confidentiality Order granted under section		Address ^{††}	43 Armistead Way	· · · · · · · · · · · · · · · · · · ·		
723B of the Companies Act 1985			Cranage			
otherwise, give your usual residential address. In the case		Post town	Crewe			
of a corporation, or Scottish firm, give the registered or principal		County / Region	Cheshire	UK Postcode	C W 4	8 F E
office address		Country	England	Nationality	British	
	Busi	ness occupation	Company Secretary			
* Voluntary details.						
N Directors In the	lame	* Style / Title	Mr			
case of a director that is a corporation or a			Day Month Year			
Scottish firm, the name is the corporate or firm name.		Date of Birth	0 9/1 2/1 9 5	6		
		Forename(s)	Garry			
tt Tick this box if the address shown is a service address for		Surname	Watts			
the beneficiary of a Confidentiality Order granted under section		Address ^{††}	Walters Farmhouse			
723B of the Companies Act 1985						
otherwise, give your usual residential address. In the case		Post town	Robertsbridge			
of a corporation, or Scottish firm, give the registered or principal		County / Region	East Sussex	UK Postcode	T N 3 2	5 B H
office address		Country	ı England	Nationality	1 British	

| Chartered Accountant

Business occupation

Issued share capital

Enter details of all the shares in issue at the date of this return.

Class

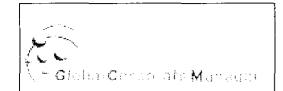
(e.g. Ordinary/Preference)

Number of shares issued

Aggregate Nominal Value

(i.e Number of shares issued multiplied by nominal value per share, or total amount of stock)

	£1 Ord.	3	£ 3.00
	<u></u>		
	LL_	1	
	Totals	3	£ 3.00
List of past and present shareholders (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two returns.	There were no changes in the	period	
	A list of changes is enclosed	on paper	in another format
	A full list of shareholders is en	closed	
			nus de des le cod es mu
Certificate	I certify that the information given knowledge and belief.	ven in this return is ti	ue to the best of my
Signed		Date	31/08/2004
† Please delete as appropriate.	† a director /s Kret Ky		
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	cont	inuation sheets
You do not have to give any contact information in the box opposite but if	Maria Buxton-Smith		
you do, it will help Companies House to contact you if there is a query on the	SSL International plc, 35 New Bridge Street, London, EC4V 6BW.		
form. The contact information that you give will be visible to searchers of the public record.		ГеI	
public record.	DX number	OX exchange	



List of past and present shareholders Schedule to form 363a

CHFP029

Company Number	1993871	

Company Name in full

Seton Healthcare Limited		

- Changes to shareholders particulars or details of the amount of stock or shares transferred must be completed each year
- You must provide a "full list" of all the company shareholders on:
 - The company's first annual return following incorporation;
 - Every third annual return after a full list has been provided
- List the company shareholders in alphabetical order or provide an index
- List joint shareholders consecutively

Shares or amount of stock transferred		
on er		
1		
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