

Please complete in typescript, or in bold black capitals. CHFP041

88(2) Return of Allotment of Shares

3 1 DEC 2007

Company Number

Company	name	in f	ull
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02798607	0 1 DEC 2004
NHP PLC	

Shares allotted (including bonus shares):

Date or period during which shares were allotted (if shares were allotted on one date enter that date in the "from" box.)

Class of shares (ordinary or preference etc.)

Number allotted

Nominal value of each share

Amount (if any) paid or due on each share (including any share premium)

	From			To	0
Day	Month	Year	Day	Month	Year
2 0	1 2 2	0 0 4			

ORDINARY	ORDINARY	ORDINARY
41,090	19,917	83,300
1p	1p	1p
82p	120.5p	36p

List the names and addresses of the allottees and the number of shares allotted to each overleaf

If the allotted shares are fully or partly paid up otherwise than in cash please state:

% that each share is to be treated as paid up

Consideration for which the shares were allotted

(This information must be supported by the duly stamped contract or by the duly stamped particulars on Form 88(3) if the contract is not in writing)



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

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for companies registered in England and Wales

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



Names and addresses of the allottees (List joint share allotments consecutively)

Shareholder details	Shares and share class allotted	
Name	Class of shares	Number
[Cost Nominees Limited A/C PAPERIN	allotted	allotted
Address		
9th Floor, 88 Wood Street,	ORDINARY	
London		_ L
UK Postcode EC2N7QR		
Name	Class of shares	Number
	allotted	allotted
Address		
		_ L
L		
UK Postcode		
Name	Class of shares	Number allotted
Addross		
Address		
	[L	_
UK Postcode L L L L L L		_
Name	Class of shares allotted	Number allotted
Address		
L	1	_ 1
UK Postcode L L L L L		
Name	Class of shares	Number
	allotted	allotted
Address		
L		1
UK Postcode L L L L L		
Please enter the number of continuation sheet(s) (if any) attached to thi	e form	
reaso order the natural of continuation sheet(s) (if any) attached to the	3 101111	
Signed Date 34	4.12.2004	
A director / secretary / administrator / administrative manager / receiver manager / receiver	Please delete as a	appropriate
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. CAPITA REGIS NORTHERN I WOODSOME	HOUSE PARK	600928