

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

## 88(2) Return of Allotment of Shares

Company name in full

02798607					
NHP PLC		 	·	·	-
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## 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			То	
Day Month Year	-	Day	Month	Year
2 1 0 2 2 0 0	, 5		: 1	
ORDINARY	ORDINARY			
37,580	142,549			:
1p	1p			!
£2.135p	£2.315p			

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)

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Form Revised January 2000

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)

Shareho	Shares and shar	Shares and share class allotted		
Name		Class of shares	Number	
SEE ATTACHED LIST		allotted	allotted	
Address				
L		LORDINARY	8,746,027	
		_	_	
UK Po	ostcode LLLLLL			
Name		Class of shares allotted	Number allotted	
Address		_	anotted	
1			I	
UK Po	ostcode L L L L L L			
Name		Class of shares	Number	
		allotted	allotted	
Address				
		_		
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Name		Class of shares	Number allotted	
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UK Po	ostcode LLLLLL		<del>-</del>	
Name		Class of shares		
		allotted	allotted	
Address				
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UK Po	ostcode LLLLLL		L	
		- th: - f		
Please enter the number of continu	uation sheet(s) (ii any) attached to	o ans form		
Signed	Date _	14.03.2005		
A d <del>irecto</del> r / secretary / <del>administrat</del> or / adminis	t <del>rative menag</del> er / receiv <del>er manager / receiver</del>	Please delete as	appropriate	
Please give the name, address,	CAPITA REGIS	TRARS		
telephone number and, if available,	OUSE			
a DX number and Exchange of the WOODS		PAHK		
person Companies House should contact if there is any query.	FENAY BRIDGE HUDDERSFIELD HD8 OLA			
contact it there is any query.		7.484 pcc 43	8-	
	DX number DX ex	change		