

Please complete in typescript,

288a

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

| or in bold black capitals. CHFP000 | | | of particulars (use Form 288c)) | | | | | | | |
|---|-------------|---------------------------|---|------------------------|---------------|------------------------------|--|---------------|------------|-------------|
| Company Number Company Name in full | | | 3428267 | | | | | | | |
| | | | EUROL | ITY | PROPE | ERTIES | (LE | NTRAL | LIMITE | D |
| | | | Day Month | · V | 204 | | | var. Manth | Voor | |
| | | Date of appointment | Day Month | | ear | [†] Date o Birth | of [| ay Month | Year | 7 |
| Appointment form Notes on completion uppear on reverse. | Appointn | nent as director | | as | secretary | | se mark the appropriate box. If appointment is director and secretary mark both boxes. | | | |
| | NAME | *Style / Title | M | K | i | *Honours | etc | | | |
| | | Forename(s) | 2 | MON | 1] | EFFRE | Υ | | | |
| | | Surname | PETERS | | | | | | | |
| | | Previous Forename(s) | | | | Previou. Surname(: | | | | |
| | Usı | al residential address | 5, SE | FTOIN | ΑV | ENUE | | | | |
| Post town County / Region †Nationality †Other directorships (additional space overleaf) Consent signature | | | MILL | 411 | - | Po | stcode | NW7 | 3QB | |
| | | | LONG |)oN | | C | Country | | | |
| | | | BRITIS | Н | †Busi | ness occup | ation c | <u> </u> | SECRETA | HRY |
| | | | I consent to ac | * ae ** d | irector / si | ecretary of | the ah | ove named | company | |
| | | | (ZWe | te te | | | Date | 10/4 | 106 | |
| Voluntary details. Directors only. | | | A director, segretary etc must sign the form below. | | | | | | | |
| *Delete as appropriate | | Signed | MH | | | | Date | 11/4/ | 06 | |
| Please give the | name a | address | (**a/director/-seeret | ary / admin | strator / adm | inistrative rec | elver/rec | eivermanager/ | receiver) | |
| elephone numbei DX number a | r and, if a | vailable, | | | | | | | | |
| ne person Companies House should ontact if there is any query. | | | Tel | | | | | | | |
| | . iy queiy. | | DX number | | DX | exchange | | | | |
| | #AC964EI1# | | When you have Registrar of Co | mpanies | at: | _ | • | | | |
| A35 COMPANIES H | OUSE | | Companies He for companies | | | | | SUZ DX 3 | 33050 Card | litt |

for companies registered in England and Wales

for companies registered in Scotland

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

DX 235 Edinburgh

Form revised July 1998

| | Company Number | |
|-------------------|----------------------------------|--|
| † Directors only. | [†] Other directorships | |
| | | |
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| | | |
| | | |

NOTES

Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on surname line 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 was known before he or she adopted the title 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.