

Please complete in typescript, or in bold black capitals

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

| OI III DOIG DIACK                         | capitais   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                | 0  | f particu   | ılars (u   | ıse l                               | Form 2                           | 288c))                     | onunge                                  |
|---|--|--|--|---|--|-------------------------------------|----------------------------------|----------------------------|---|
| CHFP029                                   | Company Number                                   | 3467035  |  |   |  |                                     | 7                                |                            |   |
|   | Company Number                                   | 0407000  |  |   |  |                                     | ]                                |                            |   |
| Ç   | ompany Name in full                              | YHUA Li  | mited  |   |  |                                     |                                  |                            |   |
|   |  |  |  |   |  |                                     |                                  |                            |   |
|   |  | Day M  | onth   | Year  |  |                                     | Day                              | Month                      | Year                                    |
|   | Date of appointment                              | 1 8 0  |  | 2 ,0 ,0 ,0  |  | Date o                              |                                  | OLL                        | 1943                                    |
| <b>Appointmen</b>                         | t  |  |  |   |  | Birth                               |                                  |                            |   |
| form                                      | Appointment as director                          | X  |  | as secretar   | ry   | Ple<br>as                           | ase mark the<br>a director and   | appropriate<br>secretary m | box. If appointment<br>park both boxes. |
| Notes on completion                       | NAME *Style / Title                              | PROFESS  | OR   |   |  | *Hor                                | nours etc                        |                            |   |
| appear on reverse.                        | Forename(s)                                      | DIANA  |  |   |  |                                     |                                  |                            |   |
|   | Surname  | GREEN  |  |   |  |                                     |                                  |                            |   |
|   | Previous<br>Forename(s)                          |  |  |   |  | Previo<br>rname                     |                                  |                            |   |
|   | Usual residential<br>address                     | 15 gi  | Anvi   | ue Den  | JE, FO   | DUR                                 | OALLS,                           | รนที่อก                    | COLPFIELD                               |
|   | Post town  | Bien   | ingi   | <del>1</del> 4M   |  |                                     | Postcode                         | B75                        | SHW                                     |
|   | County / Region                                  |  |  |   |  |                                     | Country                          | unt                        | ) hungdom                               |
|   | †Nationality                                     | BRITISH  |  |   | †Busi  | iness c                             | occupation                       | VICE CH                    | IANCELLOR                               |
|   | †Other directorships (additional space overleaf) | See  |  | ached   |  |                                     |                                  |                            |   |
|   | V  | I consent  | to act   | as ** directo   | or / secret                                      | ary of                              | the above                        | e named                    | company                                 |
|   | Consent signature                                | Ma   | na   | The   | <b>い</b>   |                                     | Date                             | 261                        | 6/00                                    |
| * Voluntary details.                      |  | A directo  | or, sec  | retary etc n  | nust sign  | the f                               | orm belo                         | w.                         |   |
| † Directors only. **Delete as appropriate | Signed   |  |  | > 1   |  |                                     | Date                             | 26.6                       | 000                                     |
|   |  | (** a director   | / secretar   | y / administrator /   | administrativ                                    | e receiv                            | er / receiver m                  | anager / rec               | ceiver)                                 |
| Please give the                           | name, address,                                   | JULIE DYSC   | )N, FINAN  | ICIAL SERVICES,   | THE UNIVERS                                      | SITY OF                             | LEEDS, LEED                      | S, WEST YO                 | RKSHIRE, LS2 9JT                        |
| a DX number an                            | er and, if available,<br>d Exchange of           |  |  |   |  |                                     |                                  |                            |   |
| the person Components if there is         | panies House should<br>s any query.              |  |  |   | Tel  | 0113 2                              | 2336012                          |                            |   |
|   |  | DX num   | ber  |   | DX 6   | excha                               | nge                              |                            |   |
| A84<br>COMPANI                            | MAU28URRCM 0882<br>E8 HOUSE 29/06/00             | When you<br>Registra<br>Compai<br>for compai<br>Compai | ou have<br>ar of Co<br>nies He<br>panies<br>nies H | e completed<br>ompanies at<br>ouse, Crow<br>registered ir<br>ouse, 37 Ca<br>registered ir | and sign<br>in Way, C<br>n England<br>astle Terr | ed the<br>ardiff<br>and \<br>ace, E | form plea<br>F, CF14 3U<br>Wales | JZ D<br>or<br>h, EH1 2     | X 33050 Card                            |

Form revised July 1998

## **Company Number**

† Directors only.

† Other directorships

| 3467035 |
|---------|
|---------|

COLLEGIATE (3) LIMITED

COLLEGIATE LIBRARY SERVICES LIMITED

COLLEGIATE PROPERTIES (2) LIMITED

COLLEGIATE PRPOPERTIES LIMITED

O & N CONTRACTING LIMITED

PHOENIX SPORTS LIMITED

SHEFFIELD FIRST FOR INVESTMENT

SHEFFIELD CITY POLYTECHNIC EDUCATIONAL TRUST CO LTD

SHEFFIELD HALLAM UNIVERSITY ENTERPRISES

SHEFFIELD INDUSTRIAL MUSEUM TRUST

SHEFFIELD ONE (SHEFIELD CITY CENTRE URBAN REGENERATION COMPANY)

SHEFFIELD TRAINING AND ENTERPRISE COUNCIL

SOUTH YORKSHIRE INVESTMENT FUND

VIRTUAL LEARNING SYSTEMS

## **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.