

Return of Allotment of Shares

CHFP000				
Company Number	4196326			
Company name in full	TOWNSHAW LID.	· ·		
Shares allotted (including bonus	shares):			
	From	То		
Date or period during which shares were allotted	Day Month Year	Day Month Year		
(If shares were allotted on one date enter that date in the "from" box.	019 014 201011			
		·····		
Class of shares	ORDINAR-1			
(ordinary or preference etc)	25.25			
Number allotted	99			
Nominal value of each share	f(x)			
Amount (if any) paid or due on each share (including any share premium)				
	lottees and the number of shares allot	ted to each overleaf		
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:				
ii the anotted shares are fully or	partiy pald up otherwise than in	cash please state:		
% that each share is to be				
treated as paid up		<u> </u>		
Consideration for which	C . C . 1			
the shares were allotted (This information must be supported by	CASM.			
the duly stamped contract or by the duly stamped particulars on Form 88(3) if the	1911-01-0			
contract is not in writing)	, , , , , , , , , , , , , , , , , , ,			
	When you have completed and	l signed the form cond it to		

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

A12 COMPANIES HOUSE

02/07/01

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Companies House, Crown Way, Cardiff CF14 3UZ

DX 33050 Cardiff

For companies registered in England and Wales

DX 235 Edinburgh

Shareholder details	Shares and share class allotted	
Name PHILIP HINDLAN	Class of shares allotted	Number allotted
Address BUEBELL CLOSE HONTINGTON CHESTER	crowns-1	_5a_
UK Postcode CH3 6 EE		<u> </u>
Name SHARON HINDLE-	Class of shares allotted	Number allotted
Address 39 BLUEBELL CLOSE HUNTINGTON CHESTER A	DROWNEY	49
UK Postcode _ CH 3 bel		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode		
Name	Class of shares allotted	Number allotted
Address		1
UK Postcode LLLLL		
Please enter the number of continuation sheet(s) (if any) attached to this Signed Date	form	, <u> </u>
	rer Please dele	ete as appropriate
A director / secretary / administrator / administrative receiver / receiver manager / receiver		
Please give the name, address, telephone number and, if available, a DX number and Exchange of the	SULLON & CO nts & Registered Auditors Penny Lane ol L18 1DG	3