

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

APPOINTMENT of director or secretary

(NOT for resignation (use Form 288b) or change of particulars (use Form 288c))

| | Compai | ny Number | 00175 | 064 | | | | | | | | | | | |
|---|---|---|---|------------------------|-----|---------|-------|-----------------|----------------|--------|---------|-------------------------------|--------|-----|---|
| Company Name in full | | | Filofax Group Limited | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| Appointmer | nt _ | | Day | Mon | ith | Year | r |]+ Data | of Birth | Da | ay T | Monti | h I | Yea | r |
| orm | Date o | f appointment | 2 5 | 0 4 | 4 2 | 0 0 | 0 1 | Date | OI DII (II | | | Ц., | | | |
| otes on completion ppear on reverse. | Appointm | ent as director | | | as | s secre | tary | х | ap, | pointi | nent | he app is as a poth box | dir | | |
| | NAME | *Style / Title | | | | | | *Hono | urs etc. | | | | | | |
| | | Forename(s) | Karen Elizabeth Curtis | | | | | | | | | | | | |
| | | Surname | | | | | | | | | | | | | |
| | Previous Forename(s) | | | Previous Surname(s) | | | | | | | | | | | |
| | Us | ual residential address | 15 Ormesby Close, North Thamesmead | | | | | | | | | | | | |
| Post town County / Region | | | London | | | | | Post | tcode SE28 8NA | | | | | | |
| | | | Cou | | | | | england England | | | | | | | |
| | | †Business occupat | | | | | tion | | | | | | | | |
| | † Othe (additional s | r directorships pace overleaf) | | | | | | | | | | | | | |
| | | | consent to act as †† directer/ secretary of the above named company | | | | | | | | | | | | |
| *Voluntary details. | Consent signature | | Dat | | | | | te 25/04/01 | | | | | | | |
| † Directors only. †† Please delete as | appropriate | | A director, secretary etc must sign the form below. | | | | | | | | | | | | |
| I lease delete as | Sign | | / | U | M | 111 | | | Dat | e | 25 | 104/ | 01 | | , |
| | | (†† a director/secretary/administrator/administrative receiver/receiver manager/receiver) | | | | | | | | | | | | | |
| D | | | Gibson, Dunn & Crutcher | | | | | | | | | | | | |
| Please give t telephone nun a DX number a | nber, and if | available, | Telephone House, 2-4 Temple Avenue, London | | | | | | | | | _ | | | |
| person Comp | | | EC4Y OHB Tel 0207 071 4000 | | | | | | | | | | | | |
| er _ | DX number 217 DX exchange Chancery Lane When you have completed and signed the form please 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 or

for companies registered in Scotland

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

Form revised July 1998

COMPANIES HOUSE

0042

10/05/01

288a/1

DX 235 Edinburgh

| | Company Number | 0017506 | 4 | | | |
|------------------|----------------------|---------|---|------|------|--|
| †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 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

- a parent company which wholly owned the company making the return, or
- another wholly owned subsidiary of the same parent company.