

Please complete in typescript, or in bold black capitals.

Appointment of director or secretary

| • | | | | | | | | | | | | | |
|--|--|--|--|-------------------|---|-------------|------------------------------|---------------------------------|-------------------------------|----------------------|----------------|--|--|
| | Company Numb | oer [| 7035 | 68 | | | | | | | | | |
| Coi | mpany Name in I | uil | CLI | MATE S | SERVICE | S LIMI | TED | | | | | | |
| × F 288A | 018 × ap | Dat pointn | e of | Da y 21 | Month 09 | Year | †Dat | e of Birth | Day | Month | Year | | |
| Appointment | Appointment as dire | ctor | | as s | ecretary | X | Please mark as a director | the approprial and secretary | le box. If app mark both b | ointment is oxes. | | | |
| form | NAME *Style / | Title | MR | | | | *Hono | urs etc | | | | | |
| votes on completion appear on reverse. | Forenam | e(s) | DAV] | ID | | | | | | | | | |
| | Surna | ıme [| ne COLLIN | | | | | | | | | | |
| | Previous Forename(s) Usual residential | e(s) | Previous Surname(s) | | | | | | | | | | |
| • | addı addı | | 33 SUNNINGDALE AVENUE | | | | | | | | | | |
| | Post t | own | KEN | ILWORT | Н | | | Postcode | CV8 2 | BY | | | |
| | County / Re | gion | WAR | WICKSF | IIRE | | | Country | 'ENGLA | AND | | | |
| †Nationality | | | BRITISH †Business occupation FINANCE DIRECTOR | | | | | | | | | | |
| (: | †Other directors additional space over | - | l cons | sent to | act as ** | director | / secreta | ey of the a | bove nar | med comp | any | | |
| Consent signature * Voluntary details. | | ture | Date 21.09.98 | | | | | | | | | | |
| † Directors only. Signed | | | A director, secretary etc must sign the form below. Date 21.09.98 | | | | | | | | | | |
| ** Please delete as app | propriate | | (**a din | ector / coc | rotary / adr | ninjekster/ | administrati | ve receiver / re | eeiver man | ager/receive | er) | | |
| Please give the name, address, telephone number and, if available, a DX number and Exchange of | | D. COLLIN CLIMATE EQUIPMENT LIMITED | | | | | | | | | | | |
| | | HIGHLANDS ROAD, SHIRLEY, SOLIHULL, WEST MIDLANDS | | | | | | | | | | | |
| the person Companies House should | | | B90 4NL Tel 0121 705 7601 | | | | | | | | | | |
| contact if there is a | any query. | _ | DX number DX exchange | | | | | | | | | | |
| When Reg Cor | | | | | When you have completed and signed the form please send it to the Registrar of Companies at: Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff or companies registered in England and Wales or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB | | | | | | | | |

for companies registered in Scotland

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

DX 235 Edinburgh

Form revised March 1995

| · · · | Company Number | |
|-----------------|----------------------------------|--|
| Directors only. | [†] Other directorships | |
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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
- * 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 .ame by which that person was known before he or she adopted the title or preceded to it.

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.