

## COMPANIES HOUSE

\*Voluntary details

## Change of director or secretary

A serving director etc must also sign the form overleaf.

| typescript or block lettering                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                  | or change of particulars.                                                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|---------------------------------------------------------------------------------|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Company number                   | CN 1050006                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Company name                     | CAMBRIDGE HESTE AND                                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                  | TALSUT                                                                          |
| Appointment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                  | Day Month Year                                                                  |
| (Turn over page<br>for resignation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Date of appointment              | DA                                                                              |
| and change of particulars).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Appointment of director          | Please mark the appropriate box.  If appointment is as a director and secretary |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Appointment of secretary         | CS mark both boxes.                                                             |
| NOTES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Name *Style/title                |                                                                                 |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Forenames<br>Surname             |                                                                                 |
| registered or principal ornice on the usual residential address line.  Give previous forenames or surname                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | *Honours etc                     | ·                                                                               |
| except:  for a married woman the name before marriage need not be given, for names not used since the age of 18 or for at least 20 years.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Previous forenames               |                                                                                 |
| A peer or individual known by a title may state the title instead of or in addition to the forenames and surname.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Previous surname                 |                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Usual residential address        | AD                                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                  |                                                                                 |
| A05 *A9W7TG2X* COMPANIES HOUSE 30/                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Post town                        |                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | County/region                    |                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                  | Country                                                                         |
| Other directorships.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Date of birth <sup>†</sup>       | DO     Nationality <sup>†</sup> NA                                              |
| Give the name of every company interpretation of which the district operated in Great Britain of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Business occupation <sup>†</sup> | oc                                                                              |
| which the person concerned is a director at any time in a received a director at any time in a received a second and a second a seco | Other directorships <sup>†</sup> |                                                                                 |
| dormant are a parent company which wholly company making the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                  |                                                                                 |
| return.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ada .                            | I consent to act as director/secretary of the above named company               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 255                              |                                                                                 |

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Resignation  Date of resignation etc.                                                                                                                                                                                                                                                                                                                                                                    | DR 0 4 (0 5 6                                                                                                                                                                             |
| This includes any form of ceasing to hold office e.g. death or removal from office).  Resignation etc, as director Resignation etc, as secretary from office).  Forenames  Surname  Date of birth (directors only)  If cessation is other than resignation, please state reason (eg death)  Change of particulars (this section is not for appointments or resignations).  Date of change of particulars | DR 0 4 ( 0 9 5)  Please mark the appropriate box.  If resignation etc is as a director and secretary mark both boxes.  HARRIAN  DO 300750                                                 |
| Complete this section in all cases where particulars of a serving director/                                                                                                                                                                                                                                                                                                                              | Please mark the appropriate box.  If change of particulars is as a director and secretary mark both boxes.                                                                                |
| secretary, have changed and then the appropriate section below.  Forenames (name previously notified to Surname Companies House)  Date of birth (directors only)                                                                                                                                                                                                                                         | DO                                                                                                                                                                                        |
| Change of name (enter new name) Forenames                                                                                                                                                                                                                                                                                                                                                                | NN                                                                                                                                                                                        |
| Surname  Change of usual residential address (enter new address)                                                                                                                                                                                                                                                                                                                                         | AD                                                                                                                                                                                        |
| Post town County/region                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                           |
| Postcode                                                                                                                                                                                                                                                                                                                                                                                                 | Country                                                                                                                                                                                   |
| Other change (please specify)                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                          | A serving director, secretary etc must sign the form below.                                                                                                                               |
| Signature                                                                                                                                                                                                                                                                                                                                                                                                | Signed Date 17/(8/9)<br>(by a serving director/secretary/administrator/administrative receiver/receiver). (Delete as appropriate)                                                         |
| After signing please return the form to the Registrar of Companies at or                                                                                                                                                                                                                                                                                                                                 | Companies House, Crown Way, Cardiff CF4 3UZ for companies registered in England and Wales Companies House, 100-102 George Street, Edinburgh EH2 3D. for companies registered in Scotland. |
| To whom should Companies House direct any enquiries about the information on this form?                                                                                                                                                                                                                                                                                                                  | 131 CAMBERWELL ROAD LONDON SE5 CHF                                                                                                                                                        |

CHARTTY No. 265103