

88(2)

To

Return of Allotment of Shares

From

Please compl	lete in typescript,
or in bold bla	ck capitals.
CHFP010	Company Nur

Company Number

1116696				
NOTTINGHAM	MANAGEMENT	SERVICES	LIMITED	 _

Company Name in full

Shares allotted (including bonus shares):

Date or period during which shares
were allotted
//f also

(if shares were allotted on one date enter that date in the "from" box)

Class of shares

(ordinary or preference etc)

Number allotted

Nominal value of each share

Amount (if any) paid or due on each share (including any share premium)

Day	Month	Yea	ar		 Day	Month	Year	
1 1	0 4	2 0	0 5					L
ORDIN	IARY							
		4						
		£1.00		,				
		£0.00						

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:

% that each sha	ire is to	be tre	eated	as
paid up				

Consideration for which the shares were allotted

(This information must be supported by the duly stamped contract or by the duly stamped particulars on Form 88(3) if the contract is not in writing)

		100%				
			 	<u></u>		
Bonus	issue					
				*	- W	



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

Companies House, Crown Way, Cardiff, CF14 3UZ For companies registered in England and Wales

DX 33050 Cardiff

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB
For companies registered in Scotland

DX 235 Edinburgh

Shareholder details		Shares and share class allotted			
Name		Class of shares allotted	Number allotted		
DENISE SOUTH		£1.00 ORDINARY	4		
Address CHARNWOOD HOUSE, WHYBURN LANE, HUCKNALL, NOTTINGHAM, ENGLAND					
UK postcode NG15 6QN	<u></u>				
Name		Class of shares allotted	Number allotted		
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					
UK postcode					
Please enter the number of cor Signed A director / sessetary / administrator / administrator /		eets (if any) attached to this form Date	D.4.05		
Please give the name, address, telephone			FET NOTTNOURM		
number and, if available, a DX number and Exchange of the person Companies House		& BREWILL, 149-155 CANAL STREET, NOTTINGHAM, HAMSHIRE, NG1 7HR, ENGLAND			
should contact if there is any query.		Tel			
	DX number	DX exchange			