

BLUEPRINT Company Secretary

Please complete in typescript,

288a

APPOINTMENT of director or secretary

(NOT for resignation (use Form 288b) or

| or in bold black capitals. | | | cna | nge d | or į | par | ticuia | ırs (ı | use Fo | orm 2 | 288 <i>C))</i> | | | |
|--|---|------------------------------|--|--|---------------------|----------------------|------------------|---------|---|----------------|----------------|--------------|-----------------------|--|
| CHFP055 | Compa | ny Number | umber 1970853 | | | | | | | | | | | |
| Company Name in full | | Lazard Fund Managers Limited | | | | | | | | | | | | |
| | | | Day Month Year | | | | | | | Day Month Year | | | | |
| Date o appointme Appointment as direct | | appointment | 0 3 | 0 | 3 | 2 | 0 0 | | | Please m | | | ox. If appointme | |
| Appointment form | NAME | | Mr | as secretary ✓ is as a director and secret #Honours etc | | | | | | | | | tary mark both boxes. | |
| Notes on completion appear on reverse. | | Forename(s) | Thomas Edmund | | | | | | | | | | | |
| | | Rice | | | | | | | | | | | | |
| | | <u></u> | | | | | | | | | | | | |
| | | Previous Surname | | | <u>-</u> | | | | | | | | | |
| | 12 Julian Hill Weybridge Postcode KT13 0RA | | | | | | | | | | | | | |
| Post town County / Region † Nationality † Other directorships (additional space overleaf) Consent Signature * Voluntary details. | | | | | | | | | | | | | | |
| | | | Surrey Country | | | | | | | L. | | | | |
| | | | | | | | | - | Busines ccupatio | s | | | | |
| | | | I consent to act as ** director / secretary of the above named company | | | | | | | | | | | |
| | | | FEN | | | | | | | Date | 13 (| 03/00 | | |
| | | | A direc | tor, se | cre | tary | etc mu | ıst siç | n the fo | rm be | low. | | | |
| Directors only. * Please delete as appropria | ate. | Signed | | 10 | ٦ | | | | | | Date | | 03/00 | |
| Please give the nam relephone number at a DX number and Ex the person Compani contact if there is an | nd, if availa cchange of es House s | ble, | (**a directi Kathryn Lazard 21 Mooi London | Silver Brother | woo | od . Co. | | | istrative rec | eiver / n | eceiver ma | anager / rec | æiver) | |
| *A1E | G1083* | ; | Registra Compa | ar of C I nies I | Com H o u | npar u se, | ies at: Crowi | n Wa | signed the | ff, CF | 14 3UZ | Z DX 3: | it to the | |

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

DX 235 Edinburgh

for companies registered in Scotland

0636

14/03/00

COMPANIES HOUSE

Form revised July 1990

| Company Number | 1970853 |
|---|---------|
| † 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 ine 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 | |
| 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 | |
| vas known before he or she adopted the itle 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 - dormant | |
| a parent company which wholly owned the company making the return, or another wholly owned subsidiary of the | |
| same parent company. | |
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