

APPOINTMENT of director or secretary

| Please complete in typescript, or in bold black capitals | | | (NOT for resignation (use Form 288b) or change of particulars (use Form 288c)) | | | | | | | | | | | | |
|---|------------------------------|------------------------|---|-----------------|-----------|--------------|-----------|-------------------------|------------------------------|----------------|-------------|----------|------|--------|------------|
| CHFP029 | | | | | | | | | _ | | ,, | | | | |
| Company Number | | | 023240 |)94 | | | | | | | | | | | |
| | | | Serco International Limited | | | | | | | | | | | | |
| | | | | | | | | | · | | | | | | |
| | | | | Month | | Year | | | | ıy I | Month | | Yea | ar | |
| Appointmer | nt | Date of appointment | 8 0 | 8 0 | 2 | 0 0 | 0 | †Date c Birth | of 2 | 5 | 0 8 | 1 | 9 | 4 | 4 |
| form | Appoin | tment as director | X as secretary Please mark the appropriate box. If appointment as a director and secretary mark both boxes. | | | | | | | | | | | | ent is |
| Notes on completion appear on reverse. | NAME | MR | MR *Hone | | | | | ours et | ours etc LICENCE DE SCIENCES | | | | | | |
| | | Forename(s) | JEAN-PIERRE | | | | | | | | | | | | |
| | | Surname | BOIDOT | | | | | | | | | | | | |
| | Previous Forename(s) | Previous Surname(s) | | | | | | | | | | | | | |
| | 42 SENTE DE LA GROTTE, 78510 | | | | | | | | | | | | | | |
| Post town County / Region | | | TRIEL S | TRIEL SUR SEINE | | | | | Postcoo | rostcode | | | | | |
| | | | | | | | | | Count | Country FRANCE | | | | | |
| | FRANCI | FRANCE †Business od | | | | | ccupati | ccupation COMPANY DIREC | | | CTOR | } | | | |
| †Other directorships (additional space overleaf) | | | | | | | | | | | | | | | |
| | | | I consent to act as ** dilectory secretary of the above named company | | | | | | | | | | | | |
| | Cons | ent signature | X | | | | + | $X \mid$ | Date | ; | 24 | Αυ | 901 | しょ | 80. |
| * Voluntary details. † Directors only. | | | A director, secretary etc must sign the form below. | | | | | | | | | | | | |
| **Delete as appropriate | | Signed | X | Va | 0 In 1 | lelem | W. | | Date |) | 24 | 18 | :(< | | |
| | | | (** a directe | ⊋⊈ / secre | tary / a | dministrator | / adminis | trative receive | r / receive | ır mər | uager / rec | ceiver | :) | | |
| Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should | | | FRANCES | CA TODE | O, SERC | CO GROUP | PLC, PAL | M COURT, 4 H | IERON SQ | UARE | E, RICHMO | OND, | SURR | EY, TV | V 9 |
| | | | 1EW | | | | | | | | | | | | |
| contact if there is | s any quer | y. | | | | | | Tel 01932 | 755900 | | | | | | |
| | DX nur | mher | | | | OX evchar | | | | | | | | | |



A36
COMPANIES HOUSE

26/08/00

Form revised July 1998

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 0 for companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

DX 33050 Cardiff

for companies registered in Scotland DX 235 Edinburgh

| | Company Number | 02324094 |
|---|---|---------------------------------------|
| † Directors only. | † Other directorships | |
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| NOTES | MOT INITIAL O. IKIL. IS also | |
| or secretary is a corporati | NOT INITIALS. If the director on or Scottish firm, show the d registered or principal office ne. | |
| Give previous forenames for a married woman, the known before marriage | e name by which she was | |
| for names not used sind least 20 years | e the age of 18 or for at | |
| nstead of or in addition to | n by a title may state the title of the forenames and surname the by which that person was dopted the title or succeeded | |
| Other directo | rships. | |
| Give the name of every c Britain of which the perso has been a director at an | ompany incorporated in Great in concerned is a director or y time in the past five years. | |
| You may exclude a comp imes during the past five concerned was a director | any which either is, or at all years when the person , was | |
| dormant | n wholly owned the company | |
| making the return, or | | |
| company. | ubsidiary of the same parent | |
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