

Please complete in typescript, or in bold black capitals

APPOINTMENT of director or secretary (NOT for resignation (use Form 288b) or change

| | | | | of na | rticula | are / | use F | orm 2 | 288c)) |) | | • | |
|--|---|--|-------------------|------------------------|-----------------|--------------------|-------------------------|------------------------------|--------------|---------|-------------|------------------|----|
| CHFP029 | Company Number | 26318 | | - Pa | | | <i>1</i> 50 <i>1</i> |] | .000// | • | | | |
| | Company Number | 20010 | | | | | | | | | | | |
| Company Name in full | | | TRUSTCARD LIMITED | | | | | | | | | | |
| | | | | | | | | ··- | | | | | |
| | | Day | Month | ıYe | ear | _ | | Day | Month | | <u>Year</u> | | |
| Appointment | Date of appointment | 1 8 | 1 0 | 2 0 | 0 1 | | Date of Birth | 0 3 | 0 1 | 1 1 | 9 (| 3 0 | |
| form | Appointment as director | tor X as secretary | | | | | | ise mark the director and | | | | | is |
| Notes on completion appear on reverse. | AME *Style / Title | tle MISS *Honours etc | | | | | | | | | | | |
| | Forename(s) | (s) DEBORAH ANN | | | | | | | | | | | |
| | Surname | SAUNDERS | | | | | | | | | | | |
| | Previous Surname(s) | | | | | | | | | | | | |
| | Usual residential address | 179 GLADBECK WAY, ENFIELD CHASE | | | | | | | | | | | |
| Post town County / Region | | | ENFIELD | | | | F | Postcode EN2 7EN | | | | | |
| | | | MIDDLESEX | | | | | Country | | | | | |
| †Nationality | | | BRITISH †Business | | | | iness o | s occupation COMPANY SECRETA | | | TARY | | |
| (8 | †Other directorships additional space overleaf) | | | | | | | | | | | | |
| | (| l conse | ent to a | ct as ** | director | / secre | tary of t | he abov | e name | d com | pan | у | _ |
| | Consent signature | D | <u> </u> | 2 | | | 3 . | Date | 19 | 10/20 | دا | | |
| * Voluntary details. † Directors only. | | A dire | ctor, s | ecretar | <u>y etc mu</u> | ı <u>st sig</u> r | the fo | rm belo | w | _ | | | _ |
| **Delete as appropriate | Signed | D.Ja_ | | | | _ | Date | 19/10/201 | | | | | |
| | | (** a direc | tor / secre | etary / adm | inistrator / ac | dministrati | ve receive r | r / receiver n | nanager / re | cciver) | | | - |
| Please give the na telephone number | and, if available, | MR. D. JARVIS, 71 LOMBARD STREET, LONDON, EC3P 3BS | | | | | | | | | | | |
| a DX number and Exchange of the person Companies House should | | | Tel 020 7356 1187 | | | | | | | | | | |



COMPANIES HOUSE

23/10/01

Form revised July 1998

DX number DX exchange When you have completed and signed the form please send it to the

Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for companies registered in England and Wales or

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

DX 235 Edinburgh

| 3 * | Company Number | 2631837 | | | | | |
|--|--|---------|-----------------|---|-------------|---------------|--|
| † Directors only. | † Other directorships | | | • | | , | |
| | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| | | | | | | | |
| NOTES | | | | | | | |
| 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 - for a married woman, the known before marriage r | e name by which she was | | _ . | · | | | |
| - for names not used since the age of 18 or for at least 20 years | | | | | | | |
| instead of or in addition to and need not give the nar | n by a title may state the title the forenames and surname ne by which that person was dopted the title or succeeded | | | | | | |
| Other director | rshins | | | | | | |
| Give the name of every co | ompany incorporated in Great in concerned is a director or y time in the past five years. | | | | | | |
| | any which either is, or at all years when the person | | | | | | |
| - dormant | | | | | | | |
| making the return, or | n wholly owned the company | | | | | | |
| another wholly owned si company. | ubsidiary of the same parent | | | | | | |
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