

Please complete in typescript, or in bold black capitals.

# CHFP029

# 46244 1840 363a

# **Annual Return**

Con	npany Number	2770716		
Compar	y Name in full	BARCLAY PHARMACEUTICALS LIMITED		
Date of this return The information in this return Date of next return If you wish to make your to a date earlier than the of this return please show Companies House will the at the appropriate time.	next return anniversary v the date here.	Day Month Year $     \begin{bmatrix}       0 & 1 & 1 & 2 & 2 & 0 & 0 & 2 \\       0 & 1 & 2 & 2 & 0 & 0 & 2     \end{bmatrix} $ Day Month Year $     \begin{bmatrix}       0 & 1 & 2 & 2 & 0 & 0 & 3 \\       0 & 1 & 2 & 2 & 0 & 0 & 3     \end{bmatrix} $		
Registered Office Show here the address this return.  Any change of registered office	at the date of  Post town	SAPPHIRE COURT  WALSGRAVE TRIANGLE  COVENTRY		
must be notified on form 287. Co	County / Region UK Postcode			
Principal business Show trade classification for the principal activity of	code number(s)	5146		
If the code number cann- give a brief description o				



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

Register of management of the registered office, so	embers embers is not kept at the tate here where it is kept.	L		
	Post town			
	County / Region	UK Postcode		
If there is a register or a duplicate of an	ebenture holders r of debenture holders, ny such register or part ept at the registered there it is kept.			
	Post town			
	County / Region	UK Postcode		
Company typ	e			
Public limited compar	ny			
Private company limit	ted by shares	X		
Private company limit share capital	ted by guarantee without			
Private company limit section 30	ted by shares exempt under	Please tick the appropriate box		
Private company limit under section 30	ted by guarantee exempt			
Private unlimited com	npany with share capital			
Private unlimited com	pany without share capital			
Company Sec	cretary			
(Please photocopy this area to provide		Details of a new company secretary must be notified on form 288a.		
details of joint sec- retaries).	Name * Style / Title	MR		
* Voluntary details.	Forename(s)	I PETER		
If a partnership give the names and addresses of the partners or the name of the partnership and office address.  Address		SMERDON		
		40 STONETON CRESCENT		
Usual residential		BALSALL COMMON		
address must be given. In the case of	<sup>a</sup> Post town	COVENTRY		
corporation, or a Scottish firm, give the registered or prin-				
cipal office address.	•			
	Country	ENGLAND		

Page 2

Details of new directors must be notified on form 288a

<b>Directors</b> Please list directors	n alphabetical order.	Details of new directors must be r	notified on form 288a
	Name * Style / Tit	le I <sup>MR</sup>	
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	nt Date of bir	Day Month Year	
	Forename(s	S) DAVID	
	Surnam	e CONDLIFFE	
	Address	18 BROMSBERROW WAY, MEIR PA	RK
Usual residential		1	
address must be given. In the case of corporation or a	POSLION	STOKE ON TRENT	
Scottish firm, give the registered or principal office address.	e Il County / Regio	n STAFFS	UK Postcode S T 3 7 U
	Count	у [	Nationality BRITISH
	Business occupatio	n BUYING DIRECTOR	
* Voluntary details.			
	Name * Style / Tit	le MR	· · · · · · · · · · · · · · · · · · ·
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corpo-	t Date of birt	Day Month Year  h 2 9 / 0 4 / 1 9 6 3	
rate or firm name.	Forename(s	i) Lian	······································
	Surnam	e DAVIDSON	
	Address	GABLE END, 190 STATION ROAD	
Usual residential		KNOWLE	
address must be given. In the case of a corporation or a	FUSITOW	n SOLIHULL	
Scottish firm, give the registered or principa office address.	e i <sup>l</sup> County / Regio	n WEST MIDLANDS	UK Postcode B 9 3 0 E
	Count	y ENGLAND	Nationality BRITISH

Business occupation | DIRECTOR

Details of new directors must be notified on form 288a

<b>Directors</b> Please list directors in alpha	abetical order.	Details of flew directors must be	nounce on form 2000
Name	* Style / Title	MR	
Directors In the case of a director that is a corporation or a Scottish firm, the	Date of birth	Day Month Year  [0 2 / 1 2 / 1 9 5 2	
name is the corpo- rate or firm name.	Forename(s)	STEPHEN ROGER	
	Surname	DUNN	
Addre	ess	13 LANSDOWNE CIRCUS	
Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.	Post town County / Region	LEAMINGTON SPA WARWICKSHIRE	UK Postcode C V 3 2 4 S V
	Country	ENGLAND	Nationality BRITISH
Busin	ness occupation	MANAGING DIRECTOR	
* Voluntary details.			
Name	* Style / Title	MR	
Directors In the case of a director that is a corporation or a Scottish firm, the	Date of birth	Day Month Year \( \begin{aligned} \( \frac{3}{1} \\ \end{aligned} \\ \frac{1}{1} \end{aligned} \\ \frac{2}{1} \end{aligned} \( \frac{1}{1} \end{aligned} \\ \frac{9}{1} \end{aligned} \\ \frac{5}{1} \end{aligned} \\ \frac{9}{1} \end{aligned} \\ \frac{1}{1} \end{aligned} \\ \frac{9}{1} \end{aligned} \\ \frac{9}{1} \end{aligned} \\ \frac{1}{1} \end{aligned} \\ \frac{1}{1} \end{aligned} \\ \frac{9}{1} \end{aligned} \\ \frac{1}{1} \end{aligned} \\ \frac{1}{1} \end{aligned} \\ \frac{9}{1} \end{aligned} \\ \frac{1}{1} \end{aligned} \\ \frac{1} \end{aligned} \\ \frac{1}{1} \end{aligned} \\ \frac{1}	
name is the corpo- rate or firm name.	Forename(s)	DAVID THOMAS	
	Surname	GITTINS	
Addre	ess	15 LEYFIELD ROAD, TRENTHAM	
Usual residential address must be given. In the case of a corporation or a	Post town	STOKE ON TRENT	
Scottish firm, give the registered or principal office address.	County / Region		UK Postcode   S   T   4     8   H   C

Country | ENGLAND

Business occupation | OPERATIONS DIRECTOR

Nationality

BRITISH

# **Directors**

## Details of new directors must be notified on form 288a

Please list directors in alphabetical order. \* Style / Title MR Name Day Month Year Directors In the case of a director that Date of birth /|0|1 /|1|9|6|7 is a corporation or a Scottish firm, the name is the corpo-Forename(s) JOSEPH VINCENT rate or firm name. **MCKENNA** Surname 24 EDMUND WRIGHT WAY Address Usual residential address must be given. In the case of a NANTWICH Post town corporation or a Scottish firm, give the registered or principal CHESHIRE County / Region UK Postcode office address. BRITISH **ENGLAND** Country Nationality DIRECTOR **Business occupation** \* Voluntary details. <sub>I</sub>MR \* Style / Title Name Month Year Day Directors In the case of a director that Date of birth is a corporation or a Scottish firm, the name is the corporate or firm name. Forename(s) **GARY MARTYN** WINKLE Surname 42 CAVENDISH ROAD, UPPER TEAN **Address** Usual residential address must be given. In the case of a Post town STOKE ON TRENT corporation or a Scottish firm, give the registered or principal County / Region **UK Postcode** office address.

**ENGLAND** 

ETHICAL DIRECTORS

Country

**Business occupation** 

Nationality

**BRITISH** 

Issued share capital Enter details of all the shares in issue at the date of this return.	Class Number of (e.g. Ordinary/Preference) shares issued		Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)			
	ORDINARY £1	25,000,000	£ 25,000,000.00			
			L			
	Totals	25,000,000	£ 25,000,000.00			
List of past and present shareholders (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two	There were no changes i	in the period				
returns.	on paper in another format  A list of changes is enclosed					
	A full list of shareholders	is enclosed X				
Certificate	I certify that the informati knowledge and belief.	on given in this return is	true to the best of my			
Signed  † Please delete as appropriate.	† a director/secretary	Date	1 1 DEC 2002			
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House.	This return includes	(enter number)	ntinuation sheets.			
Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should contact if there is any query.	MISS A WYLLIE, GEHE UK PLC, S.	APPHIRE COURT, WALSGRAVE TR	MANGLE, COVENTRY,			
Contact if those is any query.	WARWICKSHIRE, CV2 2TX	T.1				
	DX number	DX exchange :				



# List of past and present shareholders Schedule to form 363a

C	Н	F	P	n	2	9

# Company Name in full | BARCLAY PHARMACEUTICALS LIMITED

- Changes to shareholders particulars or details of the amount of stock or shares transferred must be completed each year
- You must provide a "full list" of all the company shareholders on:
  - The company's first annual return following incorporation;
  - Every third annual return after a full list has been provided
- > List the company shareholders in alphabetical order or provide an index
- List joint shareholders consecutively

	Class and	Shares or amount of stock transferred (if appropriate)		
Shareholders' details	number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer	
Name	ORDINARY £1 25,000,000			
AAH SUBSIDIARIES LIMITED	20,000,000	İ		
Address				
SAPPHIRE COURT, WALSGRAVE TRIANGLE, COVENTRY,				
ENGLAND		<b>!</b>		
UK Postcode <u>C V 2 L 2 T X</u>				
Name				
<u> </u>				
Address				
L				
	·			
UK Postcode				
Name				
<u> </u>				
Address				
L				
UK Postcode				