

88(2) **Return of Allotment of Shares**

To

Please complete in typescript, or in bold black capitals. CHWP000

Company Number

02798607

Company name in full

NHP Plc	 	·		

From

Shares allotted (including bonus shares):

Date or period during which shares were allotted

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

Dav	Month Year		Dav	Month	Year
		2 0 0 4			

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)

Ordinary	Ordinary	Ordinary	
91460	66390	40200	-
1p	1p	1p	
82.0p	120.5p	74.5p	

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 share is to be treated 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)

 	 	

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

COMPANIES HOUSE

23/04/04

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Companies House, Crown Way, Cardiff CF14 3UZ

DX 33050 Cardiff

For companies registered in England and Wales

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

DX 235 Edinburgh

Names and addresses of the allottees (List joint share allotments consecutively)

Shareholder details	Shares and share class allotte		
Name Cost Nominees Limited A/C Paperin	Class of shares allotted	Number allotted	
Address 9th Floor, 88 Wood Street,	Ordinary	198050	
London			
UK Postcode			
lame	Class of shares allotted	Number allotted	
ddress			
		L	
UK Postcode	<u> </u>	<u> </u>	
lame	Class of shares allotted	Number allotted	
ddress			
	_	L	
UK Postcode		L	
ame	Class of shares allotted	Number allotted	
ddress	•		
UK Postcode :			
ame	Class of shares allotted	Number allotted	
ddress			
	i	L	
UK Postcode			
Please enter the number of continuation sheets (if any) attached to this f	form		
ned Dat	te 22.04 2004		
A director / secretary / administrator / administrative receiver / receiver manager / receiver	ver Please d	elete as appropriat	

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.

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	T, WOKING GUZI SBH
	Tel 01483 754 760
DX number	DX exchange