

Please complete in typescript, or in bold black capitals.

CHFP029

NUEST 45 00 SUR 363a

Annual Return

Comp	oany Number	3649269		
Company	/ Name in full	Investors in Health (Chichester No. 5	i) Limited	
Date of this return	n io mada un ta	Day Month Year		
The information in this return	ir is made up to	1 4 / 1 0 / 2 0 0 0		
Date of next return If you wish to make your	next return			
o a date earlier than the anniversary f this return please show the date here.		Day Month Year		
Companies House will the appropriate time.		1 4 / 1 0 / 2 0 0 1		
Registered Office Show here the address this return.	at the date of	200 ALDERSGATE STREET		
Any change of	D. all			
registered office must be notified	Post town	LONDON		
on form 287.	County / Region			
	UK Postcode	ECIA 4JJ		
Principal business	activities			
Show trade classification		. 4504		
for the principal activity of	or activities.	4521		
If the code number can give a brief description of			√T SERVICES	
give a tive, accomplication	or principal activity.			
		When you have completed and sig Registrar of Companies at:	ned the form please send it to the	

for companies registered in England and Wales

for companies registered in Scotland

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

COMPANIES HOUSE 1
Form revised September 1999

11/11/00

Page 1

DX 235 Edinburgh

Register of mer		
f the register of meml egistered office, state	bers is not kept at the be here where it is kept.	
	L	
	Post town	
	County / Region	UK Postcode
	-	
Register of Dek If there is a register of or a duplicate of any of it, which is not kep office, state here whe	such register or part t at the registered	
	Post town	
	County / Region	UK Postcode
Company type		
Public limited company		
Private company limited	d by shares	X
Private company limited share capital	d by guarantee without	
Private company limited section 30	d by shares exempt under	Please tick the appropriate box
Private company limited under section 30	d by guarantee exempt	
Private unlimited comp	any with share capital	
Private unlimited comp	any without share capital	
Company Sec	retary	
(Please photocopy		Details of a new company secretary must be notified on form 288a.
this area to provide details of joint sec- retaries).	Name * Style / Title	
* Voluntary details.	Forename(s)	\
If a partnership give the names and addresses of the part-	Surname(s)	CLIFFORD CHANCE SECRETARIES LIMITED
ners or the name of the partnership and office address.	Address	200 ALDERSGATE STREET
Usual residential		
address must be given. In the case of a corporation, or a	Post town	LONDON
Scottish firm, give the registered or principal office address.	County / Region	UK Postcode E C 1 A 4 J J
	Country	<i>/</i>]

Directors			Details of new directors must be not	tified on form 288a
Please list directors i	n alphabeti	cal order.		
	Name	* Style / Title	MR	
Directors In the			Day Month Year	
case of a director that is a corporation or a Scottish firm, the	nt	Date of birth	2 2 / 0 5 / 1 9 5 1	
name is the corporate or firm name.		Forename(s)	ROBIN GREGORY	
		Surname	BAKER	
	Address		40 DODDINGHURST ROAD	
Usual residential				
address must be given. In the case of corporation or a		Post town	BRENTWOOD	
Scottish firm, give the registered or princip office address.		ounty / Region	ESSEX	UK Postcode C M 1 5 9 E H
		Country	ENGLAND	Nationality BRITISH
	Busines	ss occupation	GENERAL MANAGER	
* Voluntary details.				
Voluntary details.				
	Name	* Style / Title	MR	
Directors In the			Day Month Year	
case of a director the is a corporation or a Scottish firm, the		Date of birth	1 1 9 / 1 1 / 1 9 6 5	

name is the corpo-Forename(s) | JAMES STEPHEN rate or firm name. Surname | BRENT NORTON FARM, WORPLESDON **Address** Usual residential address must be given. In the case of a Post town | GUILDFORD corporation or a Scottish firm, give the registered or principal County / Region | SURREY UK Postcode |G |U |3 | office address. Country | ENGLAND Nationality | BRITISH Business occupation | BANKER

Directors

Details of new directors must be notified on form 288a

Please list directors i	n alphabe	etical order.					
	Name	* Style / Title					
Directors In the case of a director the is a corporation or a	at	Date of birth	Day Month	Year			
Scottish firm, the name is the corporate or firm name.		Forename(s)	PHILIPPA MARION				
		Surname	ROE				
	Addres	6 S	PETLEYS				
Usual residential							
address must be given. In the case o corporation or a	fa	Post town	DOWNE				
Scottish firm, give the registered or principal office address.		County / Region	KENT		UK Postcode	B R 6	[7
office address.		Country	ENGLAND		Nationality	BRITISH	<u>_</u>
	Busin	ess occupation	INVESTMENT BANK	ER			
* Voluntary details.							
	Name	* Style / Title	DR.			_	
Directors In the case of a director to is a corporation or		Date of birth	Day Month	Year			
Scottish firm, the name is the corporate or firm name.		Forename(s)	THOMAS		<u> </u>		
		Surname	SEE				
	Addr	ess	THE BELL HOUSE	ELEPHANT GRE	EN		
Usual residential address must be			L				
given. In the case corporation or a		Post town	NEWPORT				
Scottish firm, give registered or princ office address.	the cipal	County / Region	ESSEX		UK Postcod	le <u>C B 1 1 1 </u>	3 R
		Country	<u> </u>		Nationality 	SINGAPORE	

Business occupation | BANKER

Details of new directors must be notified on form 288a

Directors Please list directors in	alphabeti		Details of new directors must be	notified on form 288a
	Name	* Style / Title		
Directors In the			Day Month Year	
case of a director that is a corporation or a Scottish firm, the	t	Date of birth		
name is the corpo- rate or firm name.		Forename(s)		
		Surname	SPV MANAGEMENT LIMITED	
	Address		78 CANNON STREET	
Usual residential address must be				
given. In the case of corporation or a		Post town	LONDON	
Scottish firm, give the registered or principal office address.	e al Co	ounty / Region		UK Postcode E C 4 N 6 H H
		Country	ENGLAND	Nationality
	Busines	s occupation		
* Voluntary details.				
	Name	* Style / Title		
Directors In the			Day Month Year	
case of a director the is a corporation or a Scottish firm, the		Date of birth	'	
name is the corpo- rate or firm name.		Forename(s))	
		Surname	B [
	Addres	s		
Usual residential				
address must be given. In the case of corporation or a		Post tow	n	
Scottish firm, give t registered or princi office address.		County / Regio	n	UK Postcode
		Countr	У	Nationality
	Busine	ess occupatio	n į	

Issued share capital Enter details of all the shares in issue at the date of this return.	Class (e.g. Ordinary/Preference)	Number of shares issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)
	ORD £1	1	£ 1.00
	L		
			L
	Totals	1	£ 1.00
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	s in the period	
returns.	A list of changes is enc	on pape	er in another format
	A full list of shareholder	rs is enclosed X	
Certificate	knowledge and belief. For and on behalf of	ation given in this return	is true to the best of my
Signed	CHIPCHI CHANCES	Da	te 10 - 11 - 2000
† Please delete as appropriate.	+ a director /secretary		
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 includ	es (enter number)	continuation 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.	CLIFFORD CHANCE SECRETA	RIES LIMITED, 200 ALDERSGATE	STREET, LONDON, EC1A 4JJ
· · ·	L	Tel 020 7600 10	00
	DX number 606	DX exchange	London



List of past and present shareholders Schedule to form 363a

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v	п	г	г	v	4	v

Company Number	3649269

Company Name in full | Investors in Health (Chichester No. 5) 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	Ord £1				
INVESTORS GROUP LIMITED, THE	_				
Address					
200 ALDERSGATE STREET, LONDON	_				
UK Postcode <u>E C 1 A 4 J J</u>					
Name					
Address					
1					
UK Postcode			<u> </u>		
Name					
Address					
UK Postcode					