

Please complete in typescript, or in bold black capitals.

288a

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

| CHWP000 | | of particulars (use Form 288c)) | | | | | |
|---|--|--|--|--|--|--|--|
| | Company Number | 3925134 | | | | | |
| Cor | mpany Name in full | Site Unit Rentals Limited | | | | | |
| | Date of appointment | Day Month Year Day Month Year θ 1 0 9 2 0 0 2 †Date of Birth 2 9 0 5 1 9 6 7 | | | | | |
| form | Appointment as director | as secretary Please mark the appropriate box. If appointment is as a director and secretary mark both boxes. | | | | | |
| | NAME *Style / Title | MRS *Honours etc | | | | | |
| | Forename(s) | ORLA | | | | | |
| | Surname | CORR | | | | | |
| | Previous Forename(s) | Previous M C AVOY | | | | | |
| Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985 | ^{††} Usual residential address | 2 Ridge wood Avenue | | | | | |
| | Post town | Moy Postcode 3T717TE | | | | | |
| | County / Region | Tyeone Country N. Ireland | | | | | |
| | †Nationality | JRISH TBUSINESS OCCUPATION MANAGING DIRECTOR | | | | | |
| (0 | †Other directorships | THE MCAVOY GROUP LTD | | | | | |
| (a | dditional space overleaf) | I consent to act as ** director / section of the above named company | | | | | |
| * Voluntary details. | Consent signature | Date 20-03-02 | | | | | |
| † Directors only. | | A director, secretary etc must sign the form below. | | | | | |
| **Delete as appropriate Signed | | Marie M. Awy Date 20-09-02 | | | | | |
| You do not have | to give any contact | (**a director / secretary / administrator / administrative receiver / receiver manager / receiver) | | | | | |
| information in the b | oox opposite but if you | Lorraine Tunisty | | | | | |
| contact you if the | ompanies House to ere is a query on the | Yothe michary group and 76 Ballynakily Rol | | | | | |
| form. The contact | (Intormation than | Coalistand Tel Oas 87740372 | | | | | |
| | | DX number DX exchange | | | | | |
| | | When you have completed and signed the form please send it to the | | | | | |
| A23 | 184EYE* 0652 SE 11/10/02 | Registrar of Companies at: Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff | | | | | |
| COMPANIES HOUS | U411 | for companies registered in England and Wales or | | | | | |

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

DX 235 Edinburgh

for companies registered in Scotland

28/09/02

COMPANIES HOUSE

| | Company Number | 3925134 | | | | |
|-------------------|----------------------|---------|--|--|-------------|------|
| † Directors only. | †Other directorships | | | | | |
| | | | | | | |
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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 or surname(s) except:

- for a married woman, the name by which she was known before marriage need not be given.
- for names not used since the age of 18 or for at least 20 years

A peer or individual known by a title may state the title instead of or in addition to the forenames and surname and need not give the name by which that person was known before he or she adopted the title or succeeded to it.

Other directorships.

Give the name of every company incorporated in Great Britain of which the person concerned is a director or has been a director at any time in the past five years.

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

- dormant
- a parent company which wholly owned the company making the return, or
- another wholly owned subsidiary of the same parent company.