

Please complete in typescript, or in bold black capitals. CHFP041

88(2) Return of Allotment of Shares

3982134

Company name in full

PRIORY SE	CURITISATION	LIMITED	

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.)

From To

Day Month Year Day Month Year

2 | 3 | 1 | 2 | 2 | 0 | 0 | 2

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	
1	
£1.00	
£1.00	

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

100%

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) The issue of shares in a subsidiary company
pursuant to an agreement dated
23 December 2002

When you have completed and signed the form 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

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EBDX 235 for companies registered in Scotland
Edinburgh

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

Sharehol	Shares and share class allotted				
Name Priory Healthcare Acquisit	ion Co Limited	Class of shares allotted	Number allotted		
Address Priory House, Randalls Way	, Leatherhead, Surrey	LORDINARY			
UK Pos	stcode K T 2 2 7 T P				
Name		Class of shares allotted	Number allotted		
Address					
UK Pos	stcode LLLLL	L			
Name		Class of shares allotted	Number allotted		
Address					
		L			
UK Pos	stcode L L L L L L				
Name		Class of shares allotted	Number allotted		
Address					
L		<u></u>	L		
UK Po	stcode L L L L L L	L	L		
Name I		Class of shares allotted	Number allotted		
Address					
<u> </u>	L				
<u> </u>	<u> </u>				
UK Po	stcode L L L L L L L				
lease enter the number of continu	ation sheet(s) (if any) attached to th	is form			
igned 10 MM	Date	23 December	5 2002		
A director / secretary / administrator / administr		Please delete as ap			
Please give the name, address, telephone number and, if available,	Skadden, Arps, Slate, Meagher & Flom LLP				
a DX number and Exchange of the person Companies House should	One Canada Square, Canary Wharf, London, E14 5DS, ,				
contact if there is any query.	Ref: SNB Tel 020 7519 7000				
	DX number DX exchange				