

APPOINTMENT of director or secretary

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

Please complete in typescript,
or in bold black capitals.

CHFP010.

Company Number

4002177

Company Name in full

Barchester Healthcare Foundation

Appointment form

Notes on completion
appear on next
page.

Appointment as director

Day			Month			Year			Day			Month			Year		
1	0	0	3	2	0	0	6	† Date of Birth	0	3	1	1	1	9	4	6	

☒ 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)

Janice

Surname

Robinson

Previous forename(s)

Previous surname(s)

Usual residential address

20 Harrington Road

Post town

Brighton

Postcode

BN1 6RE

County / Region

Country

United Kingdom

† **Nationality**

British

† **Business occupation**

Consultant

† **Other directorships**
(additional space next page)

I consent to act as ** director / secretary of the above named company

Consent signature

J.E. Robinson

Date

15/03/06

* Voluntary details.

† Directors only.

** Please delete as appropriate

A director, secretary etc must sign the form below.

Signed



Date

22/3/2006

(** a director / secretary / administrator / administrative receiver / receiver manager / receiver)

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.

Jon Hather, Barchester Healthcare Foundation

Suite 201, The Chambers, Chelsea Harbour, London

SW10 0XF

Tel 020 7349 4281

DX number

DX exchange

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

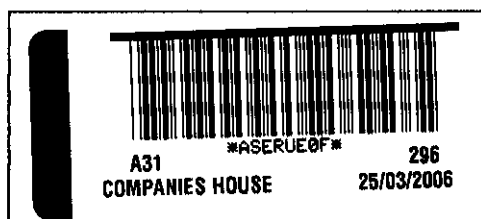
for companies registered in England and Wales

or

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

for companies registered in Scotland

DX 235 Edinburgh



Company Number

4002177

† Directors only.

† Other directorships

NONE

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.



Please complete in typescript,
or in bold black capitals.

CHFP010

Company Number

**List of other directorships
Schedule to form 288a**

4002177

Company Name in full

Barchester Healthcare Foundation

Name

JANICE ROBINSON

Company Name	Resignation
NONE	