

M

CHFP004

Please do not
write in this
margin

COMPANIES FORM No. 403a

Declaration of satisfaction in full or in part of mortgage or charge

403 a

Pursuant to section 403(1) of the Companies Act 1985

Please complete
legibly, preferably
in black type or,
bold block
lettering* insert full name
of company1 delete as
appropriate2 insert a
description of
the instrument(s)
creating or
evidencing the
charge, eg
'Mortgage',
'Charge',
'Debenture' etc.3 the date of
registration may
be confirmed
from the
certificate4 insert brief
details of
propertyTo the Registrar of Companies
(Address overleaf)

For official use

Company number

2

04059699

Name of company

* MAYFLOWER HOSPITALS LIMITED

1, Patricia Hodgkinson of 71 Ashleigh Road
of Mortlake, London, SW14 8PY[a director] ~~[the secretary]~~ ~~[the administrator]~~ ~~[the administrative receiver]~~¹ of the above company, do
solemnly and sincerely declare that the debt for which the charge described below was given has been
paid or satisfied in [full] ~~[part]~~¹Date and Description of charge² 06/08/2001, LEGAL MORTGAGEDate of Registration³ 17/08/2001Name and address of [chargee] ~~[trustee for the debenture holders]~~¹ NATIONAL
WESTMINSTER BANK PLCShort particulars of property charged⁴ F/H property k/a Florence Nightingale Hospital Bury t/n
GM863416. Floating charge over, inter alia, all moveable plant machinery and goodwill.And I make this solemn declaration conscientiously believing the same to be true and by virtue of the
provisions of the Statutory Declarations Act 1835.

Declared at 120 Wellington Street, Leeds

Declarant to sign below

Day Month Year
on 28 09 2004

before me

A Commissioner for Oaths or Notary Public or Justice of
~~the Peace or a Solicitor~~ having the powers conferred on a
Commissioner for Oaths.Presentor's name address and
reference (if any):For official Use
Mortgage Section