

Please complete in typescript,
or in bold black capitals.

CHFP010

Company Number

4094033

Company Name in full

GW PHARMA LIMITED

Changes of particulars form

Complete in all cases

Date of change of particulars

Day		Month		Year			
2	3	0	3	2	0	0	1

Name * Style / Title

MR

* Honours etc

Forename(s)

JUSTIN DAVID

Surname

GOVER

† Date of Birth

Day		Month		Year			
2	6	0	2	1	9	7	1

Change of name

(enter new name)

Forename(s)

Surname

Change of usual residential address

(enter new address)

Post town

County / Region

Country

FLAT 4, 25 CLEVELAND TERRACE

LONDON

Postcode W2 6QH

Other Change

(please specify)

A serving director, secretary etc must sign the form below.

* Voluntary details.

† Directors only.

** Delete as appropriate.

Signed

For and on behalf of
MAWLAW SECRETARIES LTD

Date

29 March 2001

(**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.

REF:356, ROWE & MAW, 20 BLACK FRIARS LANE, LONDON,

EC4V 6HD, ENGLAND

Tel

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