

Please complete in typescript, or in bold black capitals.

288c

CHANGE OF PARTICULARS for director

or secretary (NOT for appointment (use Form

CHWP000			288a) or resignation (use Form 288b))			
Company Number		4108766				
Company Name in full		CATIALYST HEALTHCARE	(NEXHAN	n) Ho	LAINGS LTD	
	Complete in all cases			Day Month Year		
Changes of particulars			Date of change of particulars	2131	0 2	001
form	Name	*Style / Title	MK *Honours etc			
		Forename(s)	ANTHONY			
		Surname	RING Day Month Year			
		† Date of Birth	015 013 1191412			
Change of name (enter new name) Forename(s)			_			
Surname						
Change of usual residential address (enter new address)			39 MOUNT ARARAT ROAD			
		Post town	RICHMOND			
		County / Region	SURREM	P	ostcode	THIO 6PM
		Country	V. K.			
Other change		(please specify)				
			A serving director, secretary etc must sign the form below.			
* Voluntary details. † Directors only.	-:	Signed	Allhudra	L'	Date	23/10/2001
Delete as appropr	nate.		(director / secretary / administrator / a	a dminiotrative re	eciver / rece	elver manage r / 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.			AILISON MITCHELL, HLM SECRETARIES 100, 9TH FLOOK.			
			ST JAMES'S MULLINGS, M OXFORD ST, MANCHESTER			
			MI GFO Tel 0161 236 8006			

DX number

COMPANIES HOUSE Form revised July 1998 01/11/01

When you have completed and signed the form please send it to the Registrar of Companies at:

DX exchange

DX 33050 Cardiff Companies House, Crown Way, Cardiff, CF14 3UZ for companies registered in England and Wales Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

DX 235 Edinburgh for companies registered in Scotland