

CHFP041

88(2)

Return of Allotment of Shares

Company Number

4493576

Company name in full

CANADA LIFE FINANCE (U.K.) LIMITED

Shares allotted (including bonus shares):

Dates or period during which
shares were allotted

(If shares were allotted on one date
enter that date in the "from" box)

From

Day Month Year

1 7 0 9 2 0 0 2

To

Day Month Year

Class of shares

(ordinary or preference etc)

ORDINARY

Number allotted

98

Nominal value of each share

£1.00

Amount (if any) paid or due on each
share (including any share premium)

£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

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)

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 2EB DX 235
For companies registered in Scotland Edinburgh



LD3 *LH08LECT* 0181
COMPANIES HOUSE 19/09/02

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

Shareholder details		Shares and share class allotted	
Name <u>4073649 CANADA INC.</u>		Class of shares allotted	Number allotted
Address <u>330 UNIVERSITY AVENUE</u> <u>TORONTO, ONTARIO, M5G 1R8</u> UK Postcode <u>LLLLLLLL</u>		<u>ORDINARY</u>	<u>98</u>
Name _____		Class of shares allotted	Number allotted
Address _____ _____ UK Postcode <u>LLLLLLLL</u>		_____	_____
Name _____		Class of shares allotted	Number allotted
Address _____ _____ UK Postcode <u>LLLLLLLL</u>		_____	_____
Name _____		Class of shares allotted	Number allotted
Address _____ _____ UK Postcode <u>LLLLLLLL</u>		_____	_____
Name _____		Class of shares allotted	Number allotted
Address _____ _____ UK Postcode <u>LLLLLLLL</u>		_____	_____

Please enter the number of continuation sheet(s) (if any) attached to this form

Signed B. Cerinjer

Date 17.09.2002

A director / secretary / administrator / administrative receiver / receiver manager / receiver

Please delete as appropriate

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.

<u>SLAUGHTER AND MAY (QWS/JPW/MSYT/ERL)</u>	
<u>ONE BUNHILL ROW, LONDON, EC1Y 8YY</u>	
Tel <u>020 7600 1200</u>	
DX number <u>11</u>	DX exchange <u>CHANCERY LANE</u>