**COMPANIES FORM No. 405(1)

Notice of appointment of receiver or manager

405(1)

CHFP000

Please do not write in this margin

Pursuant to section 405(1) of the Companies Act 1985

Please complete legibly, preferably in black type, or bold block lettering

To the Registrar of Companies (Address overleaf)

Name of company

For official use Company number 4651997

* insert full name of Company

PEREGLAE	EST	+TES	LTD.		<u>,, </u>	
BARCIAYS	BANK	PLC				
1 concence						
Lonbon	614	SHP				

ø insert name and address of receiver/manager

Ø	COLIN	R	コテンショ	145	+	400	4 H C	ے۔ م	ıs	
•	EDWALD	Su	MMONS	سرو		,		-		
	CUDISTEL	14-6	use, Li	VERS.	ÞΕ,	NEW	BAILE	7 ST.	MANCHESTE	۷_
									M3	5 A

† delete as appropriate was appointed as feeceiver[manager] [receiver and manager] of [part of] the property of the company.

The appointment was made by

[an order of the §

§	name o	f co	urt	
	making	the	order	

enter description and date of the instrument under which appointment is made, and state

whether it is a debenture secured by a floating charge made on femme / us on under the powers contained in #_

SAMCLAYS BANK PLO ACCOUNTS CENTRE EA ATH & STM PLODES FLETTREE HOUSE PLETBEE WAY PLETBEE WAY

Signed

Time critical reference

Presentors name address and féférence (if any): EAST

ELSTREE HOUSE ELSTHEE BRY E (SESSIPERATE) OD

THE BOW WEST WILL THE

For official Use (02/00) Liquidation Section



A31

20/12/2008 COMPANIES HOUSE

A12

06/12/2008 **COMPANIES HOUSE** 198

To be issued in duplicate – one copy to be retained by receiver(s). The signed original to be filed by Bank with original security documents.

TO BARCLAYS BANK PLC

CONFIRMATION OF ACCEPTANCE OF APPOINTMENT AS RECEIVER OR MANAGER OF A COMPANY'S PROPERTY

Name of Company: Peregrine Estates Ltd
Number of Company: 4651997
Full name(s) of receiver/manager(s) appointed Colin R Jennings & Hugh Dorins
Date of receipt of appointment 3 Dec 200 8
Time of such receipt 14 · 26 _am/pm
Short description of property over which appointed (if not all the Company's property)
Leasehold of 37 & 39 Manchester Road, Walkden, Manchester, M28 2NS
 I/We hereby confirm my/our acceptance of the above appointment at the time and date set our below.
2. It also hereby, being duly authorised by him to do so, confirm acceptance of the above appointment at the same time and date by the other appointment (if any) named above.
3. I/We hereby certify that I am/we are, and the other appointee (if any) named above is, qualified to act as an insolvency practitioner(s) in accordance with Part XIII of the Insolvency Act 1986 and that I/we have complied with the statutory requirements in respect of security for the proper performance of my/our functions as such receiver/manager(s).
Date of acceptance 4 Der 7008 Time of acceptance 4 35 am/pm (same day as, or business day after, date of receipt)
RECEIVER/MANAGER(S) CAJERNAYS on behalf of Receiver/MANAGER(S) Amelfond N Donne
RECEIVER/MANAGER(S) himself and M Donne
ppHIS/THER DUTY
AUTHORISED AGENT
See notes overleaf Please refer to note 6 on the reverse of this form at the time of completion.