



Companies House
— for the record —

88(2)

Return of Allotment of Shares

*Please complete in typescript, or
in bold black capitals.*

CHFP000

Company Number

4871706

Company name in full

CHARWOOD CARE LIMITED

Shares allotted (including bonus shares):

Date 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

2 0 0 8 2 0 0 3

To

Day Month Year

Class of shares

(ordinary or preference etc)

ORDINARY

Number allotted

98

Nominal value of each share

£1

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

£1

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

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**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
for companies registered in England and Wales

DX 33050 Cardiff

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB
For companies registered in Scotland

**DX 235
Edinburgh**

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

Shareholder details		Shares and share class allotted	
Name <u>Mrs Kay Julie Higgs</u> Address <u>236 Leicester Road, Loughborough, Leicester</u> <u>UK Postcode LE11 2AH</u>		Class of shares allotted <u>Ord</u>	Number allotted <u>98</u>
Name Address <u>UK Postcode</u>		Class of shares allotted 	Number allotted
Name Address <u>UK Postcode</u>		Class of shares allotted 	Number allotted
Name Address <u>UK Postcode</u>		Class of shares allotted 	Number allotted
Name Address <u>UK Postcode</u>		Class of shares allotted 	Number allotted

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

Signed E. J. Higgs Date 20-08-2003

A director / secretary / administrator / administrative receiver / company 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.

White Plume Formations Ltd Registered Office 7 Station Road, KETTER, LEICESTERSHIRE LE11 1TH	
DX number	DX exchange