

Please complete in typescript, or in bold black capitals

DX 235 Edinburgh

APPOINTMENT of director or secretary

(NOT for resignation (use Form 288b) or change

	•	of part	iculars (u	se Fori	n 288c	:))						
Company Number		51936	11		_							
Company Name in full			BRADFORD PHARMA LIMITED									
			Day	Month	Year				Da	y Month	,	Year
		Date of appointment	1			0 8		Date of I		6 1 0	1	9 5 3
Appointmer form	nt Appointme	ntasdirector	√	as	secret	ary				propriate box secretary mai		
	NAME *Style / Title		DR			ŀ	Hono	urs etc				
Notes on completion appear on reverse	1	orename(s)	PHILI	P LEON								
		Surname	GOULD									
	Previous		Previous									
	Forename(s)					<u>-</u>		ame(s)	<u></u>			
11 Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Orde granted under the provisions of section 723B of the Companies Act 1985	e Usua	l residential address tt	EVERGREEN, BENTY HEATH LANE, WILLASTON									
	ır	Post town	NESTO	NESTON					ode	e CH64 1RZ		
	Co	unty / Region	CHESH	CHESHIRE					Country			
		† Nationality	BRITI	TITISH † Business occupa					ON			
	† Other directorships (additional space overleaf)		JADARA PHARMA LIMITED, LATH MANAGEMENT SERVICES LIMITED									
			I consent to act as " director / XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX									
* Voluntary details † Directors only	Consent signature		Ban.					Dat	Date 14/10/08			
**Delete as approp	A director, secretary etc must sign the form below.											
Signed			Pet	te Sal	din		•	Dat	te	14/10	l 08	;
				(" a director / secretary / XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX								
You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the			Halliwells LLP 3 Hardman Square, Spinningfields, Manchester, M3 3EB									
form The contact information that you give will be visible to searchers of the				76/B3U0E	56.2	T.	1 (184)	4 875	8000	1		
Displic rooted	siole to searc	1	ACL/FXS/B30856 2 Tel 0844 875 8000 DX number 14317 DX exchange Manchester 1									
				When you have completed and signed the form please send it to the Registrar of Companies at								
•	ZQHF40Z* 6/10/2008	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

COMPANIES HOUSE r comunional gros

Company Number † Other directorships LIVERPOOL INTERNATIONAL HEALTH I P LIMITED LIVERPOOL INTERNATIONAL HEALTH VENTURES LIMITED WELL TRAVELLED CLINICS LIMITED LIVERPOOL ASSOCIATES IN TROPICAL HEALTH LIMITED LECTUS THERAPEUTICS LIMITED

NOTES

Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential line.

Give previous forenames or surname(s) except

- for a married woman, the name by which she was known before marriage need not be given
- for names not used since the age of 18 or for at least 20 years

A peer or individual known by a title may state the title instead of or in addition to the forenames and surname and need not give the name by which that person was known before he or she adopted the title or succeeded to it

Other directorships

Give the name of every company incorporated in Great Britain of which the person concerned is a director or has been a director at any time in the past five years

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

- dormant
- a parent company which wholly owned the company making the return, or
- another wholly owned subsidiary of the same parent company