

(Revised 2005)

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

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Return	of	Allotn	ient of	<sup>f</sup> Shares

Please complete in typescript, or in bold black capitals.		Return of Allotment of Shares			
CHFP010	Company Number	TURFTRAX COURSE SERVICES LIMITED			
	Company Name in full				
Shares al	lotted (including bonus	shares):			
(see Guidance	Booklet GBA6)	From	То		
were allotted	allotted on one date enter that	Day Month Year  1 6 0 9 2 0 0 9	Day Month Year		
Class of sha ordinary or pre		Ordinary			
Number allo	otted	45	,		
Nominal val	ue of each share	£0.05			
	nny) paid or due on each ding any share premium)	£2.22			
If the allo cash plea	,	List the names and addresses of the onus shares) are fully or partly	allottees and the number and class of shares allotted to each overlead paid up otherwise than in		
% that each paid up	share is to be treated as				
% (if any) that each share is to be paid up in cash					
Consideration	on for which the shares				
(This information	on must be supported by the original opy of the contract or by Form 88(3) if				
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**COMPANIES HOUSE** 

When you have completed and signed the form please 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 or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland DX 235 Edinburgh or LP - 4 Edinburgh 2

## Names and addresses of the allottees

Shareholder details (list joint allottees as one sharehold	Shares and	Shares and share class allotted		
Name(s)  Michael James Maher	Class of shares allo	tted Number allotted		
Michael James Maner	£0.05 Ordinary	45		
Address				
2 Banff Close, Cambridge, UK				
UK postcode CB4 2XS				
Name(s)	Class of shares allo	tted Number allotted		
		1		
Address				
	1			
UK postcode				
Name(s)	Class of shares allo	tted Number allotted		
	l l			
Address				
UK postcode				
Name(s)	Class of shares allo	tted Number allotted		
		1		
Address				
UK postcode (				
Please enter the number of cor	inuation sheets (if any) attached to this AS AUTHORISED SIGNATORY OF	form 0		
Signed A directory secretary administrator / adm	WILSUNS (COMPANY SECRETARIES)	Parte 13 15 59 elete as appropriate		
official redeiver / receiver manager / volun				
Contact Details 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 form. The contact information that you	Tel			
give will be visible to searchers of the public record.	DX number DX excha	ange Page 2		