

BR4

CHFP000

Please complete in typescript, or in bold black capitals.

Return by an oversea company subject to branch registration of change of directors or secretary or of their particulars

(Pursuant to Schedule 21A, paragraph 7(1) of the Companies Act 1985)

Company number	FC023981	Branch number BR 006631
Corporate name	Glaxo Wellcome Investment	s B.V.
Branch name		

Resignation, etc.

(This includes any form of ceasing to hold office e.g. death or removal from office) Date of resignation etc

Resignation etc, as director

Resignation etc, as secretary

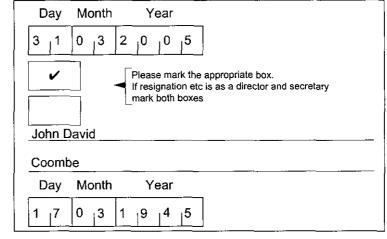
Forenames

Surname

Date of birth (directors only)

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(See note on page 4)

This return is delivered in respect of all the branches listed on page 4

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 give will be visible to searchers of the public record..

Corporate Secretaria	at, GlaxoSmithKline plc, 980 Great West Road,	
Brentford, Middlesex	r, TW8 9GS	
	Tel 020 8047 5000	
DX number	DX exchange	



When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ for branches registered in England and Wales or

DX 33050 Cardiff

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh for branches registered in Scotland or LP - 4 Edinburgh 2

(10/03)

Appointment

notify alteration of particulars)

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 address line.

Give previous forenames or surnames except:

- for a married woman the name 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 surnames.

may state the title instead of or in addition to the forenames and

* Voluntary details + Directors only

Date of appointment (Turn to page 3

Appointment of director

Appointment of secretary

*Style/title Name

Forenames

Surname

Day

Month

Year

* Honours etc

Previous forenames

Previous surname

Usual residential address**

Post town

County / region

Postcode

+ Date of birth

+ Nationality

+ Business Occupation

Please list all other directorships

+ Other directorships

Give brief particulars of the extent of the powers exercised (e.g. whether they are limited to powers expressly conferred by the instruments of appointment, or whether they are subject to express limitations) where the powers are exercised jointly, give the name(s) of the person(s).

Mark as applicable

This return must be delivered to the Registrar within 21 days of the notice being received in Great Britain in due course of post (if despatched with due diligence)

Scope of authority

Diagon mark the expression have
Please mark the appropriate box. If appointment is as a director and secretary mark both boxes.
man our soxes.
Country
tt De met tiek this hav unless the address cheum is a
** Do not tick this box unless the address shown is a service address for the beneficiary of a Confidentiality
Order granted under the provisions of section 723B of the Companies Act 1985
Day Month Year
The extent of the authority to represent the company is (give details)
(give details)
(give details) These powers:
These powers : # May be exercised acting alone # Must be exercised with :- (give names of
These powers: # May be exercised acting alone
These powers : # May be exercised acting alone # Must be exercised with :- (give names of

ALTERATION PARTICULAR		is not for appointments
;	Date of cha	inge of particulars
Complete this	Change of parti	culars, as director
section in all cases where particulars of a serving director /	Change of particu	ılars, as secretary
secretary have changed and then the appropriate section below	Forenames Surname	(name previously notified to Companies House)
	Date o	of birth (directors only)
Change of na	ame (enter new name)	Forenames
		Surname
	Change of usual resid	dential address** (enter new address)
		Post town
		County / region
		Postcode
Give brief particular authority of a direct company, includin manner in which e	uthority to act (if applicable ars of any change in the ctor to represent the ig any aiteration to the existing or new powers (e.g. requiring them to other persons.)	Nationality
	# Mark as ap	plicable

Day Month	Year
Day Month	Todi
-	ase mark the appropriate box. hange of particulars is as a director and cretary mark both boxes
Day Month	Year
	Country
service a	of tick this box unless the address shown is a address for the beneficiary of a Confidentiality ranted under the provisions of section 723B ompanies Act 1985
	authority of the above person to represent been altered to :- (give details)
 	
These powers : # May be	e exercised alone, or
	e exercised with: (give names of co-authorised persons)

numbe	tration er		Branch name		

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branch of an PART of Gre	oversea compa	any. If, however, a comp y deliver only one form i	r alteration to the compar pany has more than one in respect of all those bra	brancl	n in THE SAME
Signature					
Signed				Date	

* delete as appropriate