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JORDANS
21 St Thomas Street Bristol BS1 6JS
Telephone: 0117 923 0600 Fax: 0117 923 0063

Please complete in typescript, or in bold black capitals.

# 288a

## Appointment of director or secretary

| C                                                                               | ompany Number                       | 187484                                                                                                                                                                                                                                                                                                                    |  |  |  |  |
|---------------------------------------------------------------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| Company Nama in full                                                            |                                     |                                                                                                                                                                                                                                                                                                                           |  |  |  |  |
|                                                                                 |                                     | Day Month Year Day Month Year                                                                                                                                                                                                                                                                                             |  |  |  |  |
| SCT *SBCSM9NP* COMPANIES HOUSE 1                                                | 16/09/98 appoir                     |                                                                                                                                                                                                                                                                                                                           |  |  |  |  |
| Appointment A                                                                   | ppointment as director              | as secretary  Please mark the appropriate box. If appointment is as a director and secretary mark both boxes.                                                                                                                                                                                                             |  |  |  |  |
| form NA                                                                         | AME *Style / Title                  |                                                                                                                                                                                                                                                                                                                           |  |  |  |  |
| Notes on completion appear on reverse.                                          | Forename(s)                         |                                                                                                                                                                                                                                                                                                                           |  |  |  |  |
|                                                                                 | Surname                             |                                                                                                                                                                                                                                                                                                                           |  |  |  |  |
| Previo<br>Forename<br>Usual residen<br>addre                                    |                                     | Previous Surname(s)                                                                                                                                                                                                                                                                                                       |  |  |  |  |
|                                                                                 |                                     | 136 7167 646654 H8888 1888 1886 1886 1                                                                                                                                                                                                                                                                                    |  |  |  |  |
|                                                                                 | Post town                           | CHIPPING NORTON Postcode DX7 6AW                                                                                                                                                                                                                                                                                          |  |  |  |  |
| County / Region  †Nationality  †Other directorships (additional space overleaf) |                                     | OYOU Country ENGLANS                                                                                                                                                                                                                                                                                                      |  |  |  |  |
|                                                                                 |                                     | BRITISH †Business occupation CHARTERED SURVEYOR                                                                                                                                                                                                                                                                           |  |  |  |  |
|                                                                                 |                                     |                                                                                                                                                                                                                                                                                                                           |  |  |  |  |
| * Voluntary details.                                                            | Consent signature                   | Date 3/8/98                                                                                                                                                                                                                                                                                                               |  |  |  |  |
| † Directors only.                                                               |                                     | A director, secretary etc must sign the form below.                                                                                                                                                                                                                                                                       |  |  |  |  |
|                                                                                 | Signe                               | Alur-L lun - Date 3/8/98                                                                                                                                                                                                                                                                                                  |  |  |  |  |
| ** Please delete as approp                                                      | priate                              | (Authorised Signatory of OSWALDS OF EDINBURGH LIMITED)                                                                                                                                                                                                                                                                    |  |  |  |  |
| Please give the n                                                               | name, address,                      | OSWALDS                                                                                                                                                                                                                                                                                                                   |  |  |  |  |
| telephone number a DX number and                                                | and, if available,<br>d Exchange of | 24 GREAT KING STREET EDINBURGH                                                                                                                                                                                                                                                                                            |  |  |  |  |
| the person Compani<br>contact if there is any                                   | anies House should                  | EH1 2EB Tel 0131 557 6966                                                                                                                                                                                                                                                                                                 |  |  |  |  |
| Contact if there is any quory.                                                  |                                     | 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, CF4 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 |  |  |  |  |
|                                                                                 |                                     |                                                                                                                                                                                                                                                                                                                           |  |  |  |  |

|                   | Company Number                   |  |
|-------------------|----------------------------------|--|
| † Directors only. | <sup>†</sup> Other directorships |  |
|                   |                                  |  |
|                   |                                  |  |
|                   |                                  |  |
|                   |                                  |  |

### 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 and 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 surnames 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.

01 Nov 1997



| Individual Profile  |  |
|---------------------|--|
|                     |  |
| John Gordon Lougher |  |

## Personal Details

| Surname Lou                                                          | Title                       |              |
|----------------------------------------------------------------------|-----------------------------|--------------|
| Forenames                                                            | ohn Gordon                  |              |
| Preferred Fo                                                         | ename                       |              |
| Honours                                                              |                             |              |
| Nationality                                                          | British                     |              |
| Occupation                                                           | Chartered Quantity Surveyor |              |
| Date of Birth                                                        | 29 October 1960             |              |
| NI Number                                                            |                             |              |
| Miscellaneou                                                         | s Details                   |              |
|                                                                      | ) Addrose                   |              |
| Home(Forms                                                           | Date of Effect              |              |
| 25 High Street, Ascott-under-Wychwood, Oxon, OX7 6AW, Great Britain. |                             | 01 3/04/1007 |

| urrent Directorships                       |       |                        |
|--------------------------------------------|-------|------------------------|
|                                            | Title | Date of<br>Appointment |
| Company Name                               |       | 17 Feb 1997            |
| McBains Cooper Architecture Limited        |       | 18 Aug 1997            |
| McBains Cooper Holdings Limited            |       | 16 Aug 1997            |
| McBains Cooper Management Services Limited |       |                        |
| Sangbrand Limited                          |       | 03 Aug 1998            |