

APPOINTMENT of director or secretary

Please complete in typescript,
or in bold black capitals.

(NOT for resignation (use Form 288b) or
change of particulars (use Form 288c))

CHFP010.

Company Number

190038

Company Name in full

SCOTTISH MEDICINE LIMITED

Appointment form

Notes on completion
appear on next
page.

Appointment as director

Day Month Year Day Month Year
013 112 2003 † Date of Birth

as secretary ☒

Please mark the appropriate box. If appointment is
as a director and secretary mark both boxes.

NAME * Style / Title

* Honours etc

Forename(s)

Surname

STRONACHS

Previous
forename(s)

Previous
surname(s)

**Usual residential
address**

34 Albyn Place

Post town

Aberdeen

Postcode

AB10 1FW

County / Region

Country

SCOTLAND

† Nationality

† Business
occupation

† Other directorships
(additional space next page)

I consent to act as ** director / secretary of the above named company

Consent signature

Date

03.12.03

* Voluntary details.

† Directors only.

** Please delete as appropriate

A director, secretary etc must sign the form below.

Signed

Date

3/12/2003

(**a director / secretary / administrator / administrative receiver / receiver manager / receiver)

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.

(DAR) STRONACHS, 34 ALBYN PLACE, ABERDEEN, AB10 1FW

Tel 01224 845845

X number AB41

DX exchange ABERDEEN

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 companies registered in England and Wales

DX 33050 Cardiff

or

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

DX 235 Edinburgh

