

Shares allotted (including bonus shares):

88(2) Return of Allotment of Shares

Please complete in typescript, or in bold black capitals. CHWP000

Company Number

201063

Company name in full

MORAY FIRTH INSURANCE BROKERS LIMITED

÷	From		То	
Date or period during which shares were allotted	Day Month Ye	ear Day	Month \	ear
(If shares were allotted on one date enter that date in the "from" box)	1 3 1 0 2 0	0 4 1 3	1 0 2 0	0 4
Class of shares (ordinary or preference etc)	E ORDINARY			
Number allotted	738			
Nominal value of each share	£1.00			
Amount (if any) paid or due on each share (including any share premium)	£96.8834			
List the names and addresses of the allo	ttees and the number of s	hares allotted to eac	h overleaf	
If the allotted shares are fully or pa	artly paid up otherwis	e than in cash pl	ease state:	
% that each share is to be treated as paid up				
Consideration for which the shares were allotted (This information must be supported by the duly stamped contract or by the duly stamped particulars on Form 88(3) if the contract is not in writing)				
· · ·	When you have compl	eted and signed	the form se	nd it to

the Registrar of Companies at:

For companies registered in Scotland

Companies House, Crown Way, Cardiff CF14 3UZ

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB

For companies registered in England and Wales

DX 33050 Cardiff

DX 235

Edinburgh

COMPANIES HOUSE

02/11/04

Names and addresses of the allottees (List joint share allotments consecutively)

Shareholder details	Shares and share class allotted		
Name ROBERT JOHN JACK	Class of shares allotted	Number allotted	
Address 6 WOODSIDE CRESCENT, INVERNESS	E ORDINARY	738	
UK Postcode		L	
Name	Class of shares allotted	Number allotted	
Address			
UK Postcode Name	Class of shares	Number	
L	allotted	allotted	
Address		·	
UK Postcode	<u> </u>		
Name	Class of shares allotted	Number allotted	
Address	-		
		L	
UK Postcode			
Name	Class of shares allotted	Number allotted	
Address			
UK Postcode			
Please enter the number of continuation sheets (if any) attached to this	form 0		
signed Da	te		
A director / secretary / administrator / administrative receiver / receiver manager / rece	iver <i>Please</i> (delete as appropriate	

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.

Macleod & Ma	acCallum, 28 Queensgate,	
nverness		
	Tel 01463 239393	
DX number	DX exchange	