

Please complete in typescript, or in bold black capitals CHFP041

88(2) Return of Allotment of Shares

Company Number	SC275420				
Company name in full	Stobhill Healthcare Facilities Limited				
Shares allotted (including bonus share	es):				
	From		То		
Date or period during which shares were allotted	Day Month Year		Day Month	Year	
(If shares were allotted on one date enter that date in the "from" box)	015 014 21010	7			
Class of shares (ordinary or preference etc)	Ordinary				
Number allotted	2062				
Nominal value of each share	£1				
Amount (if any) paid or due on each share (including any share premium)	£1				
List the names and addresses of the	allottees and the number	of shares all	otted to each ov	erleaf	
If the allotted shares are fully o	or partly paid up othe	rwise than	in cash pleas	e state:	
% that each share is to be treated as paid up					
Consideration for which					
the shares were allotted			<u></u>		
(This information must be supported by the duly stamped contract or by the duly stamped particulars on Form 88(3) if the					



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

'ompanies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff or companies registered in England and Wales or impanies House, 37 Castle Terrace, Edinburgh, EH1 2EB companies registered in Scotland DX 235 Edinburgh

or LP 4 Edinburgh 2

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

Shareholder details	Shares and share class allotted			
Name Stobhill Healthcare Facilities (Holdings) Limited	Class of shares allotted	Number allotted		
Address				
8 Charlotte Square, Edinburgh	LOrdinary	2062		
		_		
UK Postcode E H 2 L 4 D R	ļ L	- L		
Name	Class of shares allotted	Number allotted		
Address				
		_		
UK Postcode L L L L L L		_		
Name	Class of shares allotted	Number allotted		
Address				
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UK Postcode L L L L L L				
Name	Class of shares allotted	Number allotted		
Address				
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UK Postcode L L L L L L	L	- L		
Name	Class of shares allotted	Number allotted		
Address				
	L	_		
UK Postcode L L L L L		_		
Please enter the number of continuation sheets (if any) attached				
SignedDate	5 April 200	07		
A director / secretary / administrator / administrative receiver / receiver manager / receiver	Please delete as a	ppropriate		
	Dundas & Wilson CS LLP			
You do not have to give any contact Dundas & Wilson CS LLP information in the box opposite but if				
information in the box opposite but if you do, it will help Companies House 20 Castle Terrace Edinburgh	ı,			
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	131) 228 8000			

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