

623364

TOWN CENTRE SECURITIES PLC

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

Company Number

Company name in full

8	8	(2))
Return of Allo	tmen	t of Shai	 ′es

Shares allotted (including bonus	shares):	
	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)	1 3 0 5 2 0 0 5	
Class of shares fordinary or preference etc)	Ordinary	
Number allotted	976	
Nominal value of each share	25p	
Amount (if any) paid or due on each share (including any share premium)		
List the names and addresses of the a	llottees and the number of shares allot	tted to each overleaf
f the allotted shares are fully or	partly paid up otherwise than in	cash please 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)		

Companies House, Crown Way, Cardiff CF14 3UZ

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB

For companies registered in England and Wales

For companies registered in Scotland

ge

20/05/05

A35 COMPANIES HOUSE

Form revised 10/03

DX 33050 Cardiff

DX 235 Edinburgh or LP - 4 Edinburgh 2

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

record.

Shareholder details	Shares and share	Shares and share class allotted		
Name DEUTSCHE NOMINEES LIMITED	Class of shares allotted	Number allotted		
Address WINCHESTER HOUSE, 1 GREAT WINCHESTER STREET	ORDINARY	976		
LONDON				
UK Postcode E C 2 N 2 D B		L		
Name	Class of shares allotted	Number allotted		
Address	_			
	_	L		
UK Postcode L L L L L L		<u> </u>		
Name	Class of shares allotted	Number allotted		
Address				
	_			
UK Postcode	L			
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 thi	is form			
signed thu Juse fle	Date 18-5-20	or ·		
A director / secretary / administrator / administrative receiver / receiver manager / re	ceiver Please	delete as appropriate		
ou do not have to give any contact nformation in the box opposite but				
you do, it will help Companies louse to contact you if there is a				
uery on the form. The contact	Tel			
nformation that you give will be	DX eychange			