

Please complete in typescript, or in bold black capitals.

CHFP010

change of particulars (use Form 288c))

| · · · · · · · · · · · · · · · · · · ·    | Company Number                                   | 32263  | 387<br>     |               |        | ·                        |         |         |       |                                       |            |
|--|--|--------|-------------|---------------|--------|--------------------------|---------|---------|-------|---------------------------------------|------------|
| Co                                       | mpany Name in full                               | GOLDI  | FISH FI     | NANCIAL S     | ERVIC  | ES LIMI                  | TED     |         |       |                                       |            |
|  |  |        |             |               |        | ·                        |         |         |       |                                       |            |
|  |  | Day    | Month       | Year          |        | _                        | Day     | Month   |       | Year                                  |            |
| Appointment form                         | Date of appointment                              | 1 0    | 0 5         | 2 0 0         | 2 †    | Date of Birth            | 0 2     | 0 7     | 1     | 9 6                                   | 2          |
| Notes on completion appear on next page. |  | х      |             | s secretary   |        | Please ma<br>as a direct |         |         |       |                                       |            |
|  | NAME * Style / Title                             |        | <del></del> | ·             | * Ho   | onours et                | c       |         |       |                                       | <u></u> :  |
|  | Forename(s)                                      | MOIR   | A LYNNE     |               |        | =====                    |         |         |       |                                       | <u>-</u> - |
|  | Surname  | TURN   | ER          |               |        |                          |         |         |       | · · · · · · · · · · · · · · · · · · · |            |
|  | Previous<br>forename(s)                          |        |             |               | sı     | Previous<br>urname(s     |         |         |       |                                       |            |
|  | Usual residential<br>address                     | FERN   | ME COT      | CAGE, 25 N    | MAIN S | STREET                   |         |         |       |                                       |            |
|  | Post town  | KIBW   | ORTH HA     | ARCOURT       |        | Pos                      | stcode  | LE8 01  | IR.   |                                       |            |
|  | County / Region                                  | LEIC   | ESTERSI     | HIRE          |        | c.                       | ountry  | UNITE   | ) KI  | NGDOM                                 | 1          |
|  | † Nationality                                    | BRIT   | rish        |               |        | Business<br>occupation   | 1 14 11 | ANCE D  | IREC  | TOR                                   |            |
| (a                                       | † Other directorships dditional space next page) | See    | attach      | ed schedu     | le     |                          |         |         |       |                                       |            |
|  |  | l cons | ent to act  | as ** directo | or/sec | <del>retary</del> of     | the abo | ve name | d cor | npany                                 | <u> </u>   |
|  | Consent signature                                | M.     | LT          | -<br>         | •      |                          | Date    | 17.     | 0.    | رح                                    | 2          |

**APPOINTMENT of director or secretary** 

(NOT for resignation (use Form 288b) or

\* Voluntary details.

† Directors only.

Signed

A director, secretary etc must sign the form below.

Date

18/6/2002

(\*\*a director /- secretary / administrator / administrative receiver / receiver / 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.

COMPANY SECRETARIAL DEPARTMENT, CENTRICA plc, MILLSTREAM, MAIDENHEAD ROAD, WINDSOR, BERKSHIRE, Tel SL4 5GD, DX number 145260 DX exchange WINDSOR 4



**COMPANIES HOUSE** 

22/06/02

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

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

DX 235 Edinburgh

<sup>\*\*</sup> Please delete as appropriate

|                   | Company Number        | 3226387 |  |
|-------------------|-----------------------|---------|--|
| † Directors only. | † 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 or 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 surname 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.





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CHFP010

**Company Number** 

## List of other directorships Schedule to form 288a

| Company Number       | 3226387                             |
|----------------------|-------------------------------------|
| Company Name in full | GOLDFISH FINANCIAL SERVICES LIMITED |
|                      |                                     |

Name

MOIRA LYNNE TURNER

| Company Name                             | Resignation |
|--|-------------|
| ALLIANCE & LEICESTER INVESTMENTS LIMITED | 20/12/2000  |
| GIROBANK CARLTON INVESTMENTS LIMITED     | 20/12/2000  |
| GOLDFISH BANK LIMITED                    |             |
| GOLDFISH HOLDINGS LIMITED                |             |
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