

Please complete in typescript, or in bold black capitals.

**CHFP029** 

## **Annual Return**

363a

£45×3

Company Number		599
Compar	ny Name in fuli	The Northern Maritime Insurance Company Limited
Date of this return The information in this retu	ırn is made un to	Day Month Year
Date of next return		
If you wish to make your next return to a date earlier than the anniversary of this return please show the date here. Companies House will then send a form at the appropriate time.  Registered Office Show here the address at the date of this return.		Day Month Year
		ST MARK'S COURT
Any change of	·	CHART WAY
registered office must be notified	Post town	HORSHAM
on form 287.	County / Region	WEST SUSSEX
	UK Postcode	RH121XL
Principal business	activities	
Show trade classification for the principal activity of		
If the code number cann give a brief description of	not be determined, of principal activity.	MARINE INSURANCE



A04 COMPANIES HOUSE

09/05/01

Form revised September 1999

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

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh

Register of me If the register of me registered office, st	embers embers is not kept at the tate here where it is kept.	30 BERKELEY SQUARE
	Post town	LONDON
	County / Region	UK Postcode W 1 J 6 E W
If there is a registe or a duplicate of ar	ebenture holders r of debenture holders, ny such register or part ept at the registered there it is kept.	
	Post town	
	County / Region	UK Postcode
mpany typ	e	
Public limited compar	ny	
Private company limi	ted by shares	X
Private company limit share capital	ted by guarantee without	
Private company limi section 30	ted by shares exempt under	Please tick the appropriate box
	ted by guarantee exempt	
	npany with share capital	
Private unlimited com	npany without share capital	
•		
Company Sec	cretary	
(Please photocopy this area to provide		Details of a new company secretary must be notified on form 288a.
details of joint sec- retaries).	Name * Style / Title	MRS
* Voluntary details.	Forename(s)	VANESSA
If a partnership give the names and addresses of the part-		JONES
ners or the name of the partnership and office address.	Address	STABLES HOUSE
Usual residential		CASTLE HILL
address must be given. In the case of corporation, or a	a Post town	BLETCHINGLEY
Scottish firm, give the registered or prin- cipal office address.	e County / Region	SURREY UK Postcode   R   H   1   4   L   B
	Country	
	•	

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Please list directors i	in alphai	betical order.				
	Name	* Style / Title	MR		_	
<b>Directors</b> In the case of a director that is a corporation or a Scottish firm, the			Day Month Year			
	at	Date of birth	2 8 / 0 3 / 1 9 6 0			
name is the corporate or firm name.		Forename(s)	KEVIN JOHN			
		Surname	POWELL			
	Addre	ess	3 BUTTERTON AVENUE, SAUGHALL	. MASSIE		
Usual residential			UPTON	·		
address must be given. In the case of corporation or a		Post town	WIRRAL			
Scottish firm, give th registered or principa office address.	e al	County / Region	MERSEYSIDE	UK Postcode	L 4 9	4 R A
•		Country	ENGLAND	Nationality	BRITISH	
	Busin	ess occupation	ACCOUNTANT			
* Voluntary details.						
	Name	* Style / Title	MR			
Directors In the			Day Month Year		_	
case of a director that is a corporation or a Scottish firm, the	at	Date of birth	0 3 / 0 1 / 1 9 5 0			
name is the corporate or firm name.		Forename(s)	PAUL			
		Surname	SPENCER			
Address		ess	THE TURRET, 3 FULHAM PARK ROA	AD		
Usual residential			1			
address must be given. In the case of a corporation or a		Post town	LONDON			
Scottish firm, give th registered or principal office address.	e al	County / Region		UK Postcode	S W 6	4 L L
		Country	ENGLAND	Nationality	BRITISH	

Business occupation | ACCOUNTANT

Details of new directors must be notified on form 288a

Issued share capital Enter details of all the shares in issue at the date of this return.	Class Number of (e.g. Ordinary/Preference) shares issued		Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)			
	£5 ORD, £3PD		10,000	£	50,000.00	
	Totals		10,000	£ 5	50,000.00	
List of past and present shareholders (Use attached schedule where appropriate) full list is required if one was not cluded with either of the last two	There were no changes	in the period				
returns.	on paper in another format  A list of changes is enclosed					
	A full list of shareholders	s is enclosed	X			
Certificate	I certify that the informat knowledge and belief.	tion given in th	is return is	s true to the bes	t of my	
Signed	† a director/secretary	aren	Date	3 Man	12001	
Please delete as appropriate.	r a <del>airector</del> /secretary					
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to <b>Companies House.</b>	This return includes	(enter num		ntinuation shee	t≰.	
Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should	WGO SECRETARIAL DEPARTME	NT, ROYAL & SUN A	LLIANCE INSUI	RANCE, 30 BERKELEY	SQUARE,	
contact if there is any query.	LONDON, WIJ 6EW			· · · · · · · · · · · · · · · · · · ·		
		Tel 020	7569 4032		<u></u>	
	DX number	DX exch	ange <sub> </sub>			



## List of past and present shareholders Schedule to form 363a

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Company Number	599
Company Name in full	The Northern Maritime Insurance Company Limited

- Changes to shareholders particulars or details of the amount of stock or shares transferred must be completed each year
- You must provide a "full list" of all the company shareholders on:
  - The company's first annual return following incorporation;
  - Every third annual return after a full list has been provided
- List the company shareholders in alphabetical order or provide an index
- List joint shareholders consecutively

	Class and	Shares or amount of stock transferred (if appropriate)			
Shareholders' details	number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer		
Name	£5 ord, £3pd 10,000				
SUN ALLIANCE AND LONDON INSURANCE PLC	,				
Address		•			
ST MARK'S COURT, CHART WAY, HORSHAM, WEST					
SUSSEX, ENGLAND					
UK Postcode R H 1 2 1 X L					
ame					
Address					
li					
ı					
UK Postcode					
Name					
Address					
UK Postcode					