

Please complete in typescript, or in bold black capitals.

3 At 2695

363a

## **Annual Return**

Company	Number
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36142

**Company Name in full** 

The Medical Protection So	ociety Limited	

* F363AD40 *

Date of this return (See note 1)
The information in this return is made up to

Date of next return(See note 2) 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.

Day	Month	Year
20	05	1998

 Day
 Month
 Year

 20
 05
 1999

Registered Office(See note 3)
Show here the address at the date of this return.

Any change of registered office **must** be notified on form 287.

Post town

County / Region

Postcode

33 CAVENDISH SQUARE

LONDON

\_\_\_\_

W1M 0PS

## Principal business activities

(See note 4)

Show trade classification code number(s) for the principal activity or activities.

7484

If the code number cannot be determined, give a brief description of principal activity.

TO PROVIDE MEDICAL AND DENTAL INDEMNITY TO MEMBERS WORDLWIDE



Form revised March 1995

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

Companies House, Crown Way, Cardiff, CF4 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 2351

DX 235 Edinburgh

Register of I	neml	bers(See note 5)	1				
registered office, s	tate her	e where it is kept.		<u></u>			
		Post town					
		County / Region		•		Postcode	
Register of I (See note 6) If there is a registe and it is not kept at state here where it	r of deb t the reg	gistered office,					
		Post town					
		County / Region				Postcode	
Company ty	pe <sub>(Se</sub>	e note 7)					
Public limited compar	ny						
Private company limit	ted by sh	nares					
Private company limit share capital	ed by gu	uarantee without	X				
Private company limit section 30	ed by sh	ares exempt under	Please mark the appropriate box				
Private company limit under section 30	ed by gu	iarantee exempt					
Private unlimited com	pany wit	h share capital					
Private unlimited com	pany wit	hout share capital					
Company Se	creta	Rry(see notes 1-5)	Details of a new	compan	y secretary	must be notif	ied on form 288a.
(Please photocopy this area to provide details of joint	Name	* Style / Title	DR			*Honours etc	
secretaries).		Forename(s)	ROY NEWBERRY				
* Voluntary details.		Surname	PALMER				
	Pre	vious forename(s)					
	Pre	evious surname(s)			····		
	Addre	ss	57 KENNINGTON	ROAD			
Usual resident				·			<del></del>
address <sub>must be</sub>	of a	Post town	LONDON				
corporation, give to registered or prince office address.	cipal	County / Region				Postcode	SE1 7PZ
		Country					

Please list direct	ee notes 1 t ctors in a	to 5) Iphabetical order.	Details of new directors	s must be notified on form	288a		
	Name	* Style / Title	MRS.		Day	Month	Year
		* Honours etc	BDS DGDP(UK)	Date of birth	23	05	1945
		Forename(s)	MEREDYTH CHERYL				I
		Surname	BELL				
	Pre	vious forename(s)			·		
	Pre	evious surname(s)					
	Addres	s	PARK HEAD, WOODHALL				
Usual resider							
address must given. In the cas corporation, give	se of a	Post town	COCKERMOUTH				
registered or pri office address.	incipal	County / Region	CUMBRIA	Postcode	CA13 0NX		,
		Country		Nationality	BRITIS	Н	
	Busines	ss occupation	DENTIST				
Other directorships			See attached list				
* Voluntary details.							
	Name	* Style / Title	RT.HON. THE LORD		Day	Month	Year
		* Honours etc	CBE BDS LDSRCS	Date of birth	01	01	1942
		Forename(s)	IAN ANTHONY				
		Surname	COLWYN				
	Prev	vious forename(s)					
	Pre	evious surname(s)					
	Address	•	BEARD MILL, STANTON HA	ARCOURT			
Usual resident address must b	be		WITNEY				
given. In the cas corporation, give registered or pri	e the	Post town					
office address.	Погран	County / Region	OXFORDSHIRE	Postcode	OX8 1A	.G.	·
		Country		Nationality	BRITIS	H	
	Busines	s occupation	DENTAL SURGEON				
	Other di	irectorships	See attached list				
		1					1

Please list dire	ectors in al	lphabetical order	2014119 01	new, direct	toro intuot be in		ı zova.			
	Name	* Style / Title	DR.				Day	Month	Year	
		* Honours etc	MB Che	FRCGP	Dobst RECY	Date of birth	17	01	1944	
		Foreneme(s)	GEORGE A	\LAN						
		Surname	CROUCH					· · · · · ·		
	Pre	vious forename(s)								
		Previous surname								
	Address	s	18 HOLLIN	S ROAD, HA	RROGATE					
Usual reside										
address must given. In the ca	t be ase of a	Post town								
corporation, giver registered or pro-	ve the rincipal	County / Region	N. YORKSI	HIRE		Postcode	HG1 2JF			
office address.		Country					1			
	Nationa	lity	BRITISH		<del></del>					
	Busines	ss occupation	DOCTOR							
	Other directorships			DIRECTORS	SHIPS					
	Name	* Style / Title	MR.				Day	Month	Voor	
	Name	* Style / Title  * Honours etc	MR. BA FCA			Date of birth	Day 07	Month	Year	
	Name	* Honours etc	BA FCA	JGH TEMPLE		Date of birth		T		
	Name	* Honours etc Forename(s)	BA FCA MARTIN HL			Date of birth		T		
		* Honours etc Forename(s) Surname	BA FCA			Date of birth		T		
	Prev	* Honours etc Forename(s) Surname vious forename(s)	BA FCA MARTIN HL			Date of birth		T		
	Prev	* Honours etc Forename(s) Surname	BA FCA  MARTIN HL  GAIRDNER			Date of birth [		T		
	Prev	* Honours etc Forename(s) Surname vious forename(s) Previous surname	BA FCA  MARTIN HL  GAIRDNER			Date of birth		T		
Usual reside	Prev F Address <i>ntial</i>	* Honours etc Forename(s) Surname vious forename(s) Previous surname	BA FCA  MARTIN HL  GAIRDNER			Date of birth		T		
address must given. In the car	Prev Address <i>ntial</i> be use of a	* Honours etc Forename(s) Surname vious forename(s) Previous surname	BA FCA  MARTIN HL  GAIRDNER	RMHOUSE, H		Date of birth		T		
address must given. In the ca corporation, giv registered or pr	Prev Address <b>ntial</b> be use of a ve the	* Honours etc Forename(s) Surname vious forename(s) Previous surname	BA FCA  MARTIN HL  GAIRDNER  HEATH FAF	RMHOUSE, H		Date of birth		07		
address must given. In the ca corporation, giv	Prev Address <b>ntial</b> be use of a ve the	* Honours etc Forename(s) Surname vious forename(s) Previous surname Previous surname	BA FCA  MARTIN HL  GAIRDNER  HEATH FAF	RMHOUSE, H			07	07		
address must given. In the ca corporation, giv registered or pr	Prev Address <b>ntial</b> be use of a ve the	* Honours etc Forename(s) Surname vious forename(s) Previous surname Post town County / Region Country	BA FCA  MARTIN HL  GAIRDNER  HEATH FAF	RMHOUSE, H			07	07		
address must given. In the ca corporation, giv registered or pr	Prevential be use of a rethe fincipal	* Honours etc Forename(s) Surname vious forename(s) Previous surname Post town County / Region Country	BA FCA  MARTIN HL  GAIRDNER  HEATH FAF  GODALMIN  SURREY  BRITISH	RMHOUSE, H	E IEATH LANE		07	07		
address must given. In the ca corporation, giv registered or pr	Prevential be use of a re the rincipal National Busines	* Honours etc Forename(s) Surname vious forename(s) Previous surname Post town County / Region Country	BA FCA  MARTIN HL  GAIRDNER  HEATH FAF  GODALMIN  SURREY  BRITISH  CHARTERE	RMHOUSE, H	E IEATH LANE		07	07		

Page 3, Continuation sheet

Directors (see notes 1-5) Please list directors in alphabetical order		Details of new director	s must be notifie	ed on form	ı 288a.				
	Name	* Style / Title	PROFESSOR			Day	Month	Year	
		* Honours etc	MA MChir FRCS FRCP	Date	of birth	03	04	1933	
		Foreneme(s)	JACK DONALD					,	
		Surname	HARDCASTLE						
	Pre	vious forename(s)					•••		
Previous surname									
	Addres	s	GOVERTON HEIGHTS, GO	OVERTON					
Usual reside			BLEASBY						
address must given. In the ca corporation, give	ase of a	Post town	NOTTINGHAM						
registered or profice address.	rincipal	County / Region			Postcode	NG14	7FN		
		Country							
	Nationa	lity	BRITISH						
	Busines	ss occupation	PROFESSOR OF SURGERY						
Other directorships			COLL SURG SERVICES LI	MITED					
			NOTTINGHAM ICE HOCKE	Y CLUB LIMITED					
	Name	* Style / Title	PROFESSOR			Day	Month	Year	
		* Honours etc	MBCMB FRCAP	Date	Date of birth 02 11			1953	
		Forename(s)	FREDERICK DAVID RICHA	RD					
		Surname	HOBBS						
	Prev	vious forename(s)							
	F	Previous surname						-	
	Address	•	48 WAKE GREEN ROAD, N	OSELEY					
Usual reside	ntial					_			
address must given. In the ca	be se of a	Post town	BIRMINGHAM						
corporation, giv registered or pr office address.	e the incipal	County / Region			Postcode	B13 9P	F		
onice addices.		Country							
	National	lity	BRITISH						
		s occupation	UNIVERSITY ACADEMIC		<b></b>				
		rectorships	NO OTHER DIRECTORSHI	PS					
* Voluntary details.									

Page 3, Continuation sheet

Directors (si	ee notes 1- ctors in a	-5) alphabetical order	Details of new director	rs must be notified o	n form	1 288a.		
	Name	* Style / Title	DR.			Day	Month	Year
		* Honours etc	FRCPI	Date of	birth	07	09	1952
		Foreneme(s)	MARY					
		Surname	KING					
	Pre	evious forename(s)						
		Previous surname					<u> </u>	
	Addres	SS	81 ANGLESEA ROAD, BAI	LLSBRIDGE	<del>.</del>			
Usual residential								
address must given. In the ca	ise of a	Post town	DUBLIN 4					
corporation, give registered or proffice address.	e the incipal	County / Region		Pos	stcode			
onice address.		Country						
	Nationa	ality	IRISH					
	Busine	ss occupation	DOCTOR				,	
	Other d	lirectorships	NO OTHER DIRECTORSH	IPS				
				<u> </u>				
			DD.					
	Name	* Style / Title	DR.			Day	Month	Year
		* Honours etc	MA MSC DPHIL FRCP	Date of t	oirth	10	07	1940
		Forename(s)	JOHN PAUL					
		Surname	MILLER			-		
	Pre	vious forename(s)				· · · · · · ·		
		Previous surname						
	Addres	•	1 BALLBROOK AVENUE					
	, idai oo	-						
Usual resider address must			MANCHESTER					
given. In the case	se of a	Post town	WATORES EX					
registered or pri office address.	incipal	County / Region		Pos	tcode	M20 6A	<u></u>	
		Country						
	Nationa	lity	BRITISH					
		ss occupation	DOCTOR					
	Other d	irectorships	HALLAM MEDICAL TRAINI	NG SERVICES LIMITED				
* Voluntary details.		;						

Page 3, Continuation sheet

Directors (s Please list dire	see notes 1- ectors in a	<sub>5)</sub> Iphabetical order	Details of new director	rs must be not	ified on form	ı 288a.			
	Name	* Style / Title	MR.			Day	Month	Year	
		* Honours etc	CBE BDS MGDSRCS	ם	ate of birth	04	09	1936	
		Foreneme(s)	RICHARD BRIAN	<u> </u>		<u>.                                    </u>	<u></u>		
		Surname	MOUATT						
	Pre	evious forename(s)							
Previous surname									
	Addres	ss	SUTHERLARACH, 30 CRE	SCENT WALK					
Usual reside			WEST PARLEY						
address must given. In the ca	ase of a	Post town	DORSET						
corporation, giver registered or prooffice address.	rincipal	County / Region			Postcode	BH22	8PZ		
onice address.		Country							
	Nationa	ality	BRITISH						
	Busine	ss occupation	DENTAL SURGEON						
Other directorships			NO OTHER DIRECTORSH	IPS					
					<u></u>				
	Name	* Style / Title	MR.			Day	Month	Year	
		* Honours etc	MB CAB FRESED FRCS	Da	ate of birth	25	07	1947	
		Forename(s)	KEITH FRANCIS						
		Surname	PARSONS						
	Pre	vious forename(s)							
	ı	Previous surname					· ·		
	Address	s	31 DERBY ROAD					•	
Usual reside	ntial								
address must given. In the ca	be	Post town	FORMBY						
corporation, giv	e the	County / Region	MERSEYSIDE		Postcode	L37 6B	N		
office address.		Country				L			
	Nationa	lity	BRITISH						
	Busines	ss occupation	UROLOGICAL SURGEON						
	Other di	irectorships	THE BRITISH JOURNAL O	F UROLOGY					
* Voluntary details.									

Please list dire	see notes 1-5 ectors in al	) phabetical order	Details of new directors m	ust be notified on form	1 288a.						
	Name	* Style / Title	MISS		Day	Month	Year				
		* Honours etc	MBCHB MD FRCOG	Date of birth	13	01	1949				
		Foreneme(s)	SUSAN MARY								
		Surname	SELLERS								
	Pre	vious forename(s)			-						
	ı	Previous surname									
	Address	6	8 BEECH ROAD, HEADINGTON	N							
Usual residential											
address must given. In the ca	t be	Post town	OXFORD			· <del>-</del> ·					
corporation, giver registered or pro-	ve the rincipal	County / Region	OXON	Postcode	OX3 7RR						
office address.	·	Country									
	Nationa	lity	BRITISH								
	Busines	s occupation	OBSTETRICIAN								
	Other di	irectorships	NO OTHER DIRECTORSHIPS								
	Name	* Style / Title	MR.		Davi	B. B. a. a. Ela	V				
		* Honours etc	MA Barrister	Date of birth	Day 28	Month 08	1946				
		Forename(s)	ROBERT CANTON	Date of Birth		00					
		Surname									
	Drov	vious forename(s)	OLWAND .		· · ·						
		, ,									
		Previous surname	AZ ZINGGTOMAN CTDEET								
	Address	•	47 KINGSTOWN STREET								
Usual reside											
address must given. In the ca corporation, giv	ise of a	Post town	LONDON								
registered or pr office address.	rincipal	County / Region		Postcode	NW1 8.	JP					
		Country									
	Mational	litv	BRITISH								
	National				LAWYER						
	Busines	s occupation	LAWYER								
	Busines	-	LAWYER See attached list								
* Voluntary details.	Busines Other di	s occupation				inuation					

Directors (s Please list dire	ee notes 1- ectors in a	-5) alphabetical order	Details of new directo	ors must be notifi	ed on form	ı 288a.		
	Name	* Style / Title	MR.			Day	Month	Year
		* Honours etc	ВА	Date	e of birth	15	03	1941
		Foreneme(s)	DAVID JOHN	<u> </u>				
		Surname	YOUNGMAN					
	Pre	evious forename(s)						
		Previous surname						
	Addres	ss	CROCKMORE HOUSE, F	AWLEY				
Usual residential								
address must given. In the ca	ase of a	Post town	HENLEY ON THAMES				·-	
corporation, givergistered or prooffice address.	e the	County / Region	OXFORDSHIRE		Postcode	RG9 6	HY	
onice address.		Country						
	Nationality		BRITISH					
	Busine	ss occupation	CHIEF EXECUTIVE					
	Other d	lirectorships	See attached list					
	Name	* Style / Title				_	//	.,
		* Honours etc		_] 	of birth	Day	Month	Year
		Forename(s)		Date	or birtir			
	_	Surname			<u></u>			
		vious forename(s)						
		Previous surname						
	Addres	s				<u>.                                    </u>		
Usual reside								
address must given. In the ca	se of a	Post town						
corporation, giv registered or pr office address.	e the incipal	County / Region			Postcode			
511100 GGG1000.		Country						
	Nationa	ılity						
	Busines	ss occupation						
	Other d	irectorships						
* Voluntary details.								

	Other relevant directorship				
Company Number	36142				
Company Name	The Medical Protection Society Limited				
Disease Name	BELL MEREDYTH CHERYL				
Directors Name	BELL WEIGHT IT OFFICE				
† Directors only. † Other directorships	BETTER PRACTICE				
	DENPLAN LIMITED				
NOTES	THE MOUNT LINE				
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.	THE VISUAL LINK				
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 preceded 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					
<ul> <li>a parent company which wholly owned the company making the return, or</li> </ul>					
<ul> <li>another who!ly owned subsidiary of the same parent company.</li> </ul>					

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	Other relevant directorshi				
Company Number	36142				
Company Name	The Medical Protection Society Limited				
Directors Name	COLWYN IAN ANTHONY				
† Directors only. † Other directorships	CORTECS PLC				
	IN PERPETUITY LIMITED				
NOTES	LORD COLWYN ORGANISATION				
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.	THE DENTAL PROTECTION SOCIETY LIMITED				
- for names not used since the age of 18 or for at least 20 years	THREE B CONSULTANTS LIMITED				
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 preceded 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.					

•	. Other relevant directorships				
Company Number					
Company Name	The Medical Protection Society Limited				
Directors Name	SEWARD ROBERT CANTON				
† Directors only. † Other directorships	GRIFFIN MANAGERS LIMITED				
	INTERNATIONAL TANKER OWNERS POLLUTION FED. LTD.				
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.	TINDALL RILEY (WAR RISKS) LIMITED				
Give previous forenames or surname(s) except: for a married woman, the name by which she was known before marriage need not be given.	TINDALL, RILEY (MARINE) LIMITED				
for names not used since the age of 18 or for at least 20 years	TINDALL, RILEY (P&I) LIMITED				
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 preceded o it.	WREN MANAGERS LIMITED				
Other directorships.					
Sive the name of every company incorporated in Great Britain of which the person concerned is a director or las been a director at any time in the past five years.					
ou may exclude a company which either is, or at all mes during the past five years when the person oncerned 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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·	Other relevant directorships
Company Number	36142
Company Name	The Medical Protection Society Limited
Directors Name	YOUNGMAN DAVID JOHN
Directors only. † Other directorships	COATES BROTHERS (SOUTH AFRICA) LIMITED
	COATES BROTHERS PENSIONS LIMITED
NOTES	COATEC PROTUERS BLO
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.	COATES BROTHERS PLC
Sive previous forenames or surname(s) except: for a married woman, the name by which she was known before marriage need not be given.	COATES ITALIA SPA
for names not used since the age of 18 or for at least 20 years	COATES OF INDIA LIMITED
s peer or individual known by a title may state the title stead of or in addition to the forenames and surname and need not give the name by which that person was nown before he or she adopted the title or preceded o it.	KLEINWORT CHARTER INVESTMENT TRUST PLC
Other directorships.	TOREX PLC
Sive the name of every company incorporated in Great stritain of which the person concerned is a director or as been a director at any time in the past five years.	
ou may exclude a company which either is, or at all mes during the past five years when the person oncerned was a director, was	TOTAL OIL G.B. LIMITED
dormant	
a parent company which wholiy owned the company making the return, or	
another wholly owned subsidiary of the same parent company.	
	·
:	

Issued share capital (see note 9) Enter details of all the shares in issue at the date of this return.	Class (e.g. Ordinary/Preference)	Number of shares issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share)		
	Totals				
List of past and present members (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two returns. (see note 10)	There were no changes i	in the period X			
	,	on paper	in another format		
	A list of changes is enclo	osed			
	A full list of members is e	enclosed			
Elective resolutions (Private companies only) (See note 11)	If at the date of this return an election is in force to dispense with annual general meetings, mark this box				
	If at the date of this return laying accord	n an election is in force unts in general meeting	to dispense with s, mark this box		
Certificate	I certify that the informati knowledge and belief.	ion given in this return is	s true to the best of my		
Signed	Kal	Date	18 Hay 1998		
† Please delete as appropriate.	† a_director/secretary				
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House.	This return includes	(enter number)	ntinuation sheets.		
Please give the name, address, telephone number, and if available,	MISS L J WHITTLE, MEDICAL PR	ROTECTION SOCIETY, 33 CAVEND	ISH SQUARE, LONDON, W1M 0PS		
a DX number and Exchange, for the person Companies House should contact if there is any query.					
	Tel 0171 399 1336				
	DX number 42736	DX exchange Oxfor	d Circus North		