

BLUEPRINT

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363a

Please complete in typescript,  
or in bold black capitals.

## Annual Return

CHFP010

Company Number

90372

Company Name in full

AXA Direct Insurance Limited

### Date of this return

The information in this return is made up  
to

Day		Month		Year			
2	3	0	4	2	0	0	7

### 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

Day		Month		Year			

### Registered Office

Show here the address at the date of  
this return

5 Old Broad Street

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

Post town

London

County / Region

UK Postcode

EC2N 1AD

### Principal business activities

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

6603

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

FRIDAY



A49

\*ANSWYP9H\*  
04/05/2007  
COMPANIES HOUSE

568

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

or

**Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB**

for companies registered in Scotland

**DX 235 Edinburgh**

**Register of members**

If the register of members is not kept at the registered office, state here where it is kept

At Registered Office

Post town

County / Region

UK Postcode

**Register of Debenture holders**

If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state where it is kept

Not applicable

Post town

County / Region

UK Postcode

**Company type**

Public limited company

Private company limited by shares

Private company limited by guarantee without share capital

Private company limited by shares exempt under section 30

Private company limited by guarantee exempt under section 30

Private unlimited company with share capital

Private unlimited company without share capital

☐☒☐☐☐☐☐

Please tick the appropriate box

**Company Secretary**

(Please photocopy this area to provide details of joint secretaries)

\* Voluntary details

If a partnership give the names and addresses of the partners or the name of the partnership and office address

**Usual residential address** must be given. In the case of a corporation, give the registered or principal office address

Name

\* Style / Title

Mr

Forename(s)

Jeremy Peter

Surname

Small

Address

Cherry Trees, West Heath

Post town

Pirbright

County / Region

Surrey

UK Postcode

GU24 0JQ

Country

England

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Details of a new company secretary must be notified on form 288a.

**Directors***Please list directors in alphabetical order***Details of new directors must be notified on form 288a**

**Directors** In the case of a director that is a corporate or a Scottish firm, the name is the corporate or firm name

<b>Name</b>	* Style / Title			
	Day	Month	Year	
Date of birth				
Forename(s)				
Surname	GRE Nominee Shareholdings Limited			
<b>Address</b>	5 Old Broad Street			
Post town	London			
County / Region			UK Postcode	EC2N 1AD
Country			Nationality	
<b>Business occupation</b>				

\* Voluntary details

<b>Name</b>	* Style / Title		Mr	
	Day	Month	Year	
Date of birth	1	1	0	1
			1	9
			6	5
Forename(s)	Jeremy Peter			
Surname	Small			
<b>Address</b>	Cherry Trees, West Heath			
Post town	Pirbright			
County / Region	Surrey		UK Postcode	GU24 0JQ
Country	England		Nationality	British
<b>Business occupation</b>	Company Director			

**Issued share capital**

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, or total amount of stock)

ORDINARY	6,300,000	£63,000,000.00
<b>Totals</b>	6,300,000	63,000,000.00

**List of past and present shareholders**

(use attached schedule where appropriate)

A full list is required if one was not included with either of the last two returns

There were no changes in the period

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on paper

in another format

A list of changes is enclosed

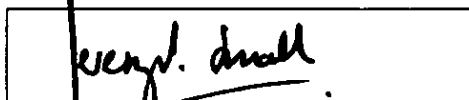
☐☐

A full list of shareholders is enclosed

☐☐**Certificate**

I certify that the information given in this return is true to the best of my knowledge and belief

Signed



Date

23/04/07

† 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

0

continuation sheets

(enter number)

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

AXA UK plc, Group Company Secretary's Department,

5 Old Broad Street, London, EC2N 1AD

Tel

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DX number

DX exchange