

Please complete in typescript, or in bold black capitals.

195423aV

363a

## Annual Return

**Company Number** 

209324

Company Name in full



\* 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.

LLOYDS BANK TRUSTEES LIMITED		

Day Month Year
25 03 1997

Day	Month	Year
25	03	1998

71 LOMBARD STREET

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

LONDON

LONDON

EC3P 3BS

## Principal business activities

(See note 4)

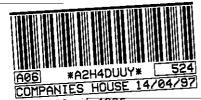
Show trade classification code number(s) for the principal activity or activities.

7480

1		
1		
1		
1		

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

NOMINEE COMPANY



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 235 Edinburgh

Register of r	nembers	S(See note 5)					
registered office, st	ate here wh	ere it is kept.					
		Post town					
,	C	ounty / Region				Postcode	
	O	ounty / Region				rosicode	
Register of E			N/A				
If there is a register and it is not kept at state here where it	the register	red office,	1477				
		Post town					
	С	ounty / Region				Postcode	
Company ty	<b>pe</b> (See no	te 7)					
Public limited compar			-				
Private company limit			   <b>X</b>				
Private company limit share capital							
Private company limit section 30	ted by shares	exempt under	Please mark the appropriate box				
Private company limit under section 30	ted by guaran	tee exempt					
Private unlimited com	pany with sha	are capital					
Private unlimited com	pany without	share capital					
Company Se	ecretary,	(see notes 1-5)	Details of a new	/ compan	y secretary	must be notifi	ed on form 288a.
(Please photocopy this area to provide	Name	* Style / Title	MRS.			*Honours etc	
details of joint secretaries).		Forename(s)	NICOLA SUZANNE				
* Voluntary details.		Surname	BLACK				
voluntary details.	Previou	us forename(s)					
	Previo	ous surname(s)					
	Address		FIVE PENNIES				
Usual resident			FARTHING GREE	N LANE			
address <sub>must be</sub>	e of a	Post town	STOKE POGES				
corporation, give registered or prin office address.	- t 1	ounty / Region	BUCKS			Postcode	SL2 4JQ
The second section of the second section is		Country					

Please list directors in alphabetical order.			Details of new directors must be notified on form 288a							
	Name	* Style / Title	MR.		Day	Month	Year			
		* Honours etc		Date of birth	31	01	1949			
Forename(s)			DEREK GRAHAM DESMOI	ND						
Surname .			BOOKER							
Previous forename(s)										
	Pre	evious surname(s)								
	Address	<b>3</b>	28 SERGISON ROAD							
Usual resider	ntial									
address must li given. In the cas	be se of a	Post town	HAYWARDS HEATH							
corporation, give registered or pri office address.	e the ncipal	County / Region	SUSSEX	Postcode	RH16 INX					
		Country		Nationality	BRITISH					
Business occupation			BANKER							
	Other di	irectorships	NO OTHER DIRECTORSHIPS							
* Voluntary details.						-				
			•	n						
	Name	* Style / Title	MR		Day	Month	Year			
		* Honours etc		Date of birth	29	07	1954			
		Forename(s)	IAN JAMES							
		Surname	BREBNER							
•	Prev	vious forename(s)								
	Pre	evious surname(s)								
Address Usual residential address must be			8 WEAVERS CLOSE							
given. In the case	se of a e the	Post town	BURGESS HILL	110 110 110 110 110 110 110 110 110 110						
registered or pri office address.	uicipal	County / Region	WEST SUSSEX	Postcode	RH15 (	OQD				
		Country		Nationality	BRITIS	;H				
	Busines	ss occupation	BANK OFFICIAL							
	Other di	irectorships	NO OTHER DIRECTORSHIPS							

Please list direct	tors in al	) phabetical order	Details of new direct	tors must be noti	tied on torm	288a.				
	Name	* Style / Title	MR.			Day	Month	Year		
		* Honours etc		Da	ate of birth	13	06	1951		
		Foreneme(s)	DAVID EDWARD							
		Surname	BROWN							
	Prev	vious forename(s)				•				
	F	Previous surname								
	Address	<b>S</b>	7 HUNTINGDON WAY							
Usual residential										
address must be given. In the case	se of a	Post town	BURGESS HILL							
corporation, give registered or prin	e the	County / Region	WEST SUSSEX		Postcode	RH15	0NR			
office address.		Country				1				
	Nationality		BRITISH							
Business occupation Other directorships			BANK EXECUTIVE							
			NO OTHER DIRECTORSHIPS							
			MR.				•			
	Name	* Style / Title	IVIN.		٦	Day	Month	Year		
		* Honours etc		D:	ate of birth	07	05	1951		
		Forename(s)	PETER WILLIAM							
		Surname	DACOMBE							
	Pre	vious forename(s)								
	!	Previous surname								
	Address	S	THREE CHIMNEYS, TYLERS GREEN							
				··						
Usual resident address must be given. In the case	be	Post town	CUCKFIELD							
corporation, give registered or prin	e the ncipal	County / Region	WEST SUSSEX Postcode RH17 5E		5EA					
office address.		Country								
	Nationa	lity	BRITISH							
Business occupation										
	Busines	ss occupation	BANKING							
		ss occupation irectorships	BANKING  NO OTHER DIRECTOR	RSHIPS						
* Voluntary details.		<del>-</del>		RSHIPS						

Page 3, Continuation sheet

Directors (see Please list direct	e notes 1-5 tors in al <sub>l</sub>	i) phabetical order	Details of new director	s must be notifie	d on form	288a.			
	Name	* Style / Title	MR.			Day	Month	Year	
		* Honours etc		Date	of birth	25	02	1955	
		Foreneme(s)	ROBERT MICHAEL						
		Surname	OLIVER						
Previous forename(s)							;		
		Previous surname			<u> </u>				
	Addres	5	36 LEYLANDS PARK		·				
Usual resider	ntial					<u> </u>			
address must given. In the car	be	Post town	BURGESS HILL			· · · · · · · · · · · · · · · · · · ·			
corporation, given	e the	le Outte / Davis WEST SUSSEY	Postcode	RH15 8	BAH				
office address.		Country				L			
Nationality  Business occupation			BRITISH						
			BANK MANAGER						
Other directorships			NO OTHER DIRECTORSHIPS						
			·						
	Name	* Style / Title	MR.			Day	Month	Vear	
		* Honours etc		Date	of birth	13	08	1950	
		Forename(s)							
		Surname							
	Pre	evious forename(s)							
		Previous surname							
			LOWLANDS FARM, SCHOOL LANE, BLACKBOYS						
Address			UCKFIELD						
Usual residential									
address must given. In the ca corporation, giv	se of a	Post town	EAST SUSSEX						
registered or pr office address.	incipal	County / Region		Postcode		e TN22 5LN			
		Country							
	Nationa	ality	BRITISH						
		ss occupation	BANK SENIOR MANAGER						
	Other d	lirectorships	NO OTHER DIRECTORS	IIPS					
* Voluntary details.						-			
					Page	e 3, Con	tinuation	sheet	

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)
	ORD. SHS OF £1	100	£ 100.00
	Totals	100	£ 100.00
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	There were no changes	s in the period	
returns.		on paper	in another format
(see note 10)	A list of changes is encl		
	A full list of members is	enclosed X	
Elective resolutions (Private companies only) (See note 11)	If at the date of this retu	ırn an election is in force annual general meeting	to dispense with Is, mark this box
	If at the date of this retu laying acco	ırn an election is in force ounts in general meeting	to dispense with s, mark this box
Certificate	I certify that the informa knowledge and belief.	ition given in this return is	s true to the best of my
Signed	Mindlade	Date	M4/97
† 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 include	es <u>2</u> co	ontinuation sheets.
Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should	MRS. N.S. BLACK, 71 LOMBARD	STREET, LONDON, EC3P 3BS	
contact if there is any query.		Tel 0171 356 191	10
0171 356 1910	DX number	DX exchange	. •



Please complete in typescript, or in bold black capitals.

## List of past and present members Schedule to form 363a, 363b

Company Number	209324				
Company Name in full	LLOYDS BANK TRUSTEES LIMITED				
Name and address	amount a	Particulars of shares or the date of the last retur first return, since the ind company) by (a) persons who are stil (b) persons who have c umber or Date of amount registration ansferred of transfer	n (or in the case of the		
LLOYDS BANK PLC 71 LOMBARD STREET, LONDON, EC3P 3BS	ord. shs of £1				