

Please complete in typescript, or in bold black capitals.

## 363a

## Annual Return 3840256 US 156775

Company Number

226742

Company Name in full

General Accident Life Assurance Limited	



\* F363AD40 \*

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

Day	MOTILII	Teal
01	10	1996

## 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
<b>Q</b> 1	10	1997

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

YORK

2 ROUGIER STREET

Postcode

Y01 1HR

## Principal business activities

(See note 4)

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

8600

If the code number cannot be determined, give a brief description of principal activity. INDIVIDUAL LIFE CONTRACTS, SELF EMPLOYED AND INDIVIDUAL



DOULTHIES HOUSE 29/10/96 Form revised March 1995

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

DX 33050 Cardiff Companies House, Crown Way, Cardiff, CF4 3UZ for companies registered in England and Wales

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

	Country	SCOTLAND		
registered or principal office address.	County / Region	PERTHSHIRE	Postcode	PH2 OEF
given. In the case of a corporation, give the	Post town	PERTH		
<b>Usual residential</b> address must be				
Addres	s	19 YOUNG STREET		
Pre	vious surname(s)			
Prev	vious forename(s)			
* Voluntary details.	Surname	WHITE		
······································	Forename(s)	PHILIP MARTIN		
this area to provide Name details of joint secretaries).	* Style / Title		*Honours etc	FCIS, MAAT
Company Secretar	•	Details of a new company	y secretary must be notified	
Private unlimited company wit	thout share capital			
Private unlimited company wit	h share capital			
Private company limited by gu under section 30	arantee exempt			
Private company limited by sh section 30		Pleas	se mark the appropriate box	(
Private company limited by gu share capital				
Private company limited by sh		х		
Public limited company				
Company type (See )	note 7)			
	1			L
	County / Region		Postcode	YO1 1HR
	Post town	YORK		
If there is a register of debe and it is not kept at the reg state here where it is kept.	istered office,			
Register of Debent		2 ROUGIER STREET		
	County / Region		Fostcode	
	[		Postcode	YO1 1HR
	Post town	YORK		
If the register of members i registered office, state here	s not kept at the where it is kept.			
Register of membe	rs (See note 5)	2 ROUGIER STREET		

Please list direc		o 5) phabetical order.	Details of new directors	must be notific	ed on form 28	38a			
•	Name	* Style / Title	MR			Day	Month	Year	
		* Honours etc		Da	ate of birth	24	01	1937	
		Forename(s)	LYNDON						
		Surname	BOLTON						
	Prev	vious forename(s)							
	Pre	vious surname(s)							
	Address		BURCOTT, HERRINGS LAN	VE					
Usual resident			BURNHAM MARKET						
address must be given. In the ca corporation, given	se of a	Post town	KINGS LYNN	•					
registered or pri office address.	incipal	County / Region	NORFOLK		Postcode	PE31 8	BDP		
		Country	ENGLAND		Nationality	BRITIS	H		
	Business	occupation	RETIRED INVESTMENT CO	NSULTANT					
	Other di	rectorships	See attached list						
* Voluntary details	i.					-			
			L						
	Name	* Style / Title	THE RT HON			Day	Month	Year	
		* Honours etc	KT GCVO PC DL	Da	ate of birth	17	05	1926	
		Forename(s)	DAVID GEORGE PATRICK	COKE					
		Surname	EARL OF AIRLIE			·			
	Prev	vious forename(s)	DAVID GEORGE PATRICK COKE						
	Pre	evious surname(s)	OGILVY						
	Address		5 SWAN WALK						
Usual resident address must b									
given. In the ca corporation, giv registered or pri	se of a e the	Post town	LONDON						
office address.	тограг	County / Region			Postcode	SW3 4	IJ		
		Country			Nationality	BRITIS	H		
	Business	occupation	LORD CHAMBERLAIN						
	Other di	rectorships	See attached list						
				··					

Please list direc	tors in alph	nabetical order					
•	Name	* Style / Title	THE RT HON THE		Day	Month	Year
		* Honours etc		Date of birth	07	07	1931
		Foreneme(s)	LORD BARRY OWEN SOMERSET				
		Surname	FARNHAM				
	Previo	ous forename(s)	BARRY OWEN SOMERSET				
	Pre	evious surname	FARNHAM				
	Address		11 EARLS COURT GARDENS	3			
Usual resident	tial						
address must be given. In the ca	ise of a	Post town	LONDON	<del>- 1 </del>			
corporation, give registered or proffice address.	ve the incipal (	County / Region		Postcode	SW5	OTD	
Office address.		Country					
	Nationality		BRITISH				
	Business o	occupation					
	Other dire	ctorships	See attached list				
			AAD				
	Name	* Style / Title	MR		Day	Month	Year
	Name	* Style / Title  * Honours etc	MR	Date of birth	Day 04	Month	Year 1944
	Name	·	MR WILLIAM HENDERSON	Date of birth		1	1
	Name	* Honours etc		Date of birth		1	1
		* Honours etc Forename(s)	WILLIAM HENDERSON	Date of birth		1	1
	Previo	* Honours etc Forename(s) Surname	WILLIAM HENDERSON	Date of birth		1	1
	Previo	* Honours etc  Forename(s)  Surname  ous forename(s)	WILLIAM HENDERSON	Date of birth		1	1
House residen	Previo Pr Address	* Honours etc  Forename(s)  Surname  ous forename(s)	WILLIAM HENDERSON  JACK	Date of birth		1	1
Usual residen address must k given. In the ca	Previo Pr Address <i>tial</i> pe	* Honours etc  Forename(s)  Surname  ous forename(s)	WILLIAM HENDERSON  JACK	Date of birth		1	1
address must be given. In the call corporation, given registered or property of the call corporation.	Previo	* Honours etc Forename(s) Surname ous forename(s) revious surname	JACK  DALMORE, ARDCHOILLE PARK	Date of birth	04	12	1
address must be given. In the calcorporation, given	Previo	* Honours etc Forename(s) Surname ous forename(s) revious surname Post town	JACK  DALMORE, ARDCHOILLE PARK		04	12	1
address must be given. In the call corporation, given registered or property of the call corporation.	Previo	* Honours etc Forename(s) Surname ous forename(s) revious surname  Post town Country / Region Country	JACK  DALMORE, ARDCHOILLE PARK		04	12	1
address must be given. In the call corporation, given registered or property of the call corporation.	Previo	* Honours etc Forename(s) Surname ous forename(s) revious surname  Post town Country / Region Country	WILLIAM HENDERSON  JACK  DALMORE, ARDCHOILLE PARK  PERTH		04	12	1
address must be given. In the call corporation, given registered or property of the call corporation.	Previo	* Honours etc Forename(s) Surname ous forename(s) revious surname  Post town County / Region Country y occupation	WILLIAM HENDERSON  JACK  DALMORE, ARDCHOILLE PARK  PERTH  BRITISH		04	12	1
address must be given. In the call corporation, given registered or property of the call corporation.	Previo	* Honours etc Forename(s) Surname ous forename(s) revious surname  Post town County / Region Country y occupation	WILLIAM HENDERSON  JACK  DALMORE, ARDCHOILLE PARK  PERTH  BRITISH  INSURANCE MANAGER		04	12	1

<b>Directors</b> (see no Please list directo			Details of new direct	tors must be notifi	ed on form 2	88a.		
Name		* Style / Title	MR			Day	Month	Year
		* Honours etc	BSC	D	ate of birth	09	07	1926
		Foreneme(s)	IAN ANDREW HILL					
		Surname	JOHNSTON				· · · · · · · · · · · · · · · · · · ·	
	Prev	rious forename(s)						
	F	Previous surname						
Д	ddress		BARFIELD, BRANDSB	SY				
Usual residentia	a/							
<i>address</i> must be given. In the case	e of a	Post town	YORK					
corporation, give the registered or principal office address.  National	the	County / Region			Postcode	Y06 4	IRG	
	Country							
	lationali	ity	BRITISH		]			
Busine		occupation	COMPANY DIRECTO	R	<u> </u>			
C	Other di	rectorships	See attached list					
				·				
N	lame	* Style / Title	MR			Day	Month	Year
		* Honours etc			Date of birth	17	06	1936
		Forename(s)	BRIAN					
		Surname	RICHARDSON					
	Prev	vious forename(s)						
		Previous surname						
ı	Address	,	34B BENNINGT	ON ROAD				
Usual residenti	al	1	ASTON			;		
<i>address</i> must be given. In the cas	e of a	Post town	STEVENAGE					,
corporation, give registered or prir office address.	the ncipal	County / Region	HERTFORDSHIR	RE	Postcode	SG	2 7DY	
		Country						
ı	National	lity	BRITISH					
		s occupation	DIRECTOR					
•	Other di	irectorships	See attached list					
* Voluntary details.								
					Page	e 3, Co	ntinuatio	n sheet

Please list direc		phabetical order	Details of new directors	s must be notified on form 2	288a.				
•	Name	* Style / Title	MR		Day	Month	Year		
		* Honours etc		Date of birth	06	01	1942		
		Foreneme(s)	ROBERT AVISSON						
		Surname	SCOTT						
	Prev	vious forename(s)							
	F	Previous surname							
	Address		GLEBE HOUSE, AUCHTER	RARDER ROAD					
Usual resident	ial								
address must b	e se of a	Post town	DUNNING						
corporation, giv registered or pri office address.	e the ncipal	County / Region	PERTHSHIRE	Postcode	PH2 C	RJ			
Office address.		Country							
	Nationality BRITISH								
	Business	occupation	INSURANCE MANAGER						
	Other di	rectorships	See attached list						
	Name	* Style / Title	MR		Day	Month	Year		
		* Honours etc	BSC MBA FIA FIAA AAI	Date of birth	19	03	1944		
		Forename(s)	PHILIP JOHNSON						
		Surname	TWYMAN						
	Prev	vious forename(s)							
	ı	Previous surname							
	Address		FLAT 7, 40 TAY STREET						
Usual resident	tial								
address must be given. In the ca	e se of a	Post town	PERTH						
corporation, give registered or pro- office address.	e the incipal	County / Region		Postcode	PH1 5	TR			
omee address.		Country	SCOTLAND		<u> </u>				
	National	ity	AUSTRALIAN						
	Business	s occupation	ACTUARY/FINANCE DIRE	ECTOR			_		
	Other di	rectorships	GENERAL ACCIDENT PLO	3					
	5.				,				

Page 3, Continuation sheet

Please list direct	ors in al	phabetical order	Details of new directors	s must be notified on for	n 266	oa.		
ĺ	Name	* Style / Title	MR			Day	Month	Year
		* Honours etc		Date of birt	h [	20	03	1949
		Foreneme(s)	MICHAEL NORRIS					
		Surname	URMSTON					
	Prev	rious forename(s)						
	F	Previous surname						
,	Address		THE COACH HOUSE, FUL	FORD PARK				
Usual residenti	ial		FULFORD					
address must be given. In the cas	e of a	Post town	YORK					
corporation, give registered or prir office address.	e the ncipal	County / Region		Postco	de	YO1 4	QΕ	
ornee address.		Country					···	
Ī	Nationali	ty	BRITISH					
i i	Business	occupation	ACTUARY					
(	Other dir	ectorships	See attached list					
ı	Name	* Style / Title		 ]		Dov	Month	Voor
1	Name	* Style / Title		Date of birt		Day	Month	Year
I	Name	* Honours etc		Date of birt		Day	Month	Year
ľ	Name	* Honours etc Forename(s)		Date of birt		Day	Month	Year
		* Honours etc Forename(s) Surname		Date of birt		Day	Month	Year
	Prev	* Honours etc  Forename(s)  Surname  vious forename(s)		Date of birt		Day	Month	Year
•	Prev	* Honours etc Forename(s) Surname		Date of birt		Day	Month	Year
	Prev	* Honours etc  Forename(s)  Surname  vious forename(s)		Date of birt		Day	Month	Year
Usual residenti	Prev f Address	* Honours etc  Forename(s)  Surname  vious forename(s)		Date of birt		Day	Month	Year
Usual residenti address must be given. In the cas	Prev Address <i>ial</i> ese of a	* Honours etc  Forename(s)  Surname  vious forename(s)		Date of birt		Day	Month	Year
Usual residenti address must be	Prev Address <i>ial</i> ese of a es the	* Honours etc Forename(s) Surname vious forename(s) Previous surname		Date of birt	:h	Day	Month	Year
Usual residenti address must be given. In the cas corporation, give registered or prin	Prev Address <i>ial</i> ese of a es the	* Honours etc Forename(s) Surname vious forename(s) Previous surname Post town			:h	Day	Month	Year
Usual residenti address must be given. In the cas corporation, give registered or prir office address.	Prev Address <i>ial</i> ese of a es the	* Honours etc Forename(s) Surname vious forename(s) Previous surname  Post town County / Region Country			:h	Day	Month	Year
Usual residenti address must be given. In the cas corporation, give registered or prir office address.	Previous Address ial second as the encipal National	* Honours etc Forename(s) Surname vious forename(s) Previous surname  Post town County / Region Country			:h	Day	Month	Year
Usual residenti address must be given. In the cas corporation, give registered or prir office address.	Prevention Address  Field Second Seco	* Honours etc Forename(s) Surname vious forename(s) Previous surname  Post town County / Region Country			:h	Day	Month	Year

Other relevant directorships **Company Number** 226742 General Accident Life Assurance Limited Company Name **BOLTON LYNDON** Directors Name ALLIANCE TRUST (FINANCE) LTD Directors only. Other directorships ALLIANCE TRUST (FINANCE) NO 1 LIMITED **NOTES** ALLIANCE TRUST (FINANCE) NO 10 LIMITED 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. ALLIANCE TRUST (FINANCE) NO 4 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. - for names not used since the age of 18 or for at ALLIANCE TRUST (FINANCE) NO 4 LIMITED 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 ALLIANCE TRUST SAVINGS LTD Other directorships. ALLIANCE TRUST SAVINGS NOMINEES LIMITED 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. ALLSEC NOMINEES LTD 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 GENERAL ACCIDENT PLC a parent company which wholly owned the company making the return, or - another wholly owned subsidary of the same parent PROVIDENT MUTUAL LIFE ASSURANCE LIMITED company. SCOTTISH FINANCIAL ENTERPRISE SECDEE LEASING LTD SECOND ALLIANCE LEASING LIMITED THE ALLIANCE TRUST PLC THE SECOND ALLIANCE TRUST PLC

TSB GROUP PENSION TRUST LTD

**TSB GROUP PLC** 

Other relevant directorships Company Number 226742 General Accident Life Assurance Limited Company Name Directors Name | EARL OF AIRLIE DAVID GEORGE PATRICK COKE BARING STRATTON INVESTMENT TRUST PLC Directors only. Other directorships GENERAL ACCIDENT PLC **NOTES** PROVIDENT MUTUAL LIFE ASSURANCE LIMITED 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 ROYAL BANK OF SCOTLAND GROUP PLC 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 THE ROYAL BANK OF SCOTLAND PLC 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 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 - a parent company which wholly owned the company making the return, or - another wholly owned subsidary of the same parent company.

Other relevant directorships Company Number 226742 General Accident Life Assurance Limited Company Name FARNHAM LORD BARRY OWEN SOMERSET **Directors Name** AVON RUBBER PLC Directors only. Other directorships BRITISH KIDNEY PATIENT ASSOCIATION **NOTES** BROWN SHIPLEY HOLDINGS PLC 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 registery line. on the usual residential line. BROWN SHIPLEY PENSION TRUSTEES 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. - for names not used since the age of 18 or for at GENERAL ACCIDENT MANAGED PENSION FUNDS LIMITED 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 PROVIDENT MUTUAL LIFE ASSURANCE LIMITED Other directorships. PROVIDENT MUTUAL NOMINEES LIMITED 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. SHAW TRUST LIMITED 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 TRUSTEES OF THE LONDON CLINIC LIMITED - a parent company which wholly owned the company making the return, or another wholly owned subsidary of the same parent UNITED STATES DEBENTURE CORPORATION PLC company.

Other relevant directorships Company Number 226742 General Accident Life Assurance Limited Company Name Directors Name JACK WILLIAM HENDERSON GENERAL ACCIDENT LIFE DEVELOPMENTS LIMITED Other directorships Directors only. GENERAL ACCIDENT PEP MANAGERS LIMITED **NOTES GULLCEDAR LIMITED** 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. HALIFAX FINANCIAL SERVICES HOLDINGS 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. for names not used since the age of 18 or for at least 20 years HALIFAX LIFE 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. HALIFAX UNIT TRUST MANAGEMENT LIMITED Other directorships. NZI LIFE IRELAND LIMITED 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. PROVIDENT MUTUAL LIFE ASSURANCE LIMITED 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 subsidary of the same parent company.

Company Number 226742 General Accident Life Assurance Limited Company Name Directors Name JOHNSTON IAN ANDREW HILL PROVIDENT MUTUAL LIFE ASSURANCE LIMITED Other directorships Directors only. PURITAN MAID LTD **NOTES** T.H.F. (U.K.) LTD 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. T.H.F. PLC 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 - a parent company which wholly owned the company making the return, or another wholly owned subsidary of the same parent company.

Other relevant directorships

Other relevant directorships 226742 Company Number General Accident Life Assurance Limited Company Name RICHARDSON BRIAN **Directors Name** CAREERS RESEARCH AND ADVISORY CENTRE (CRAC) LIMITED Directors only. Other directorships **EDUCATION 2000 TRUST (THE) NOTES** GENERAL ACCIDENT MANAGED PENSION FUNDS LIMITED 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. GENERAL ACCIDENT TRUSTEES 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. - for names not used since the age of 18 or for at MCDONNELL DOUGLAS BANK LIMITED 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 PROVIDENT MUTUAL DEVELOPMENTS LIMITED Other directorships. PROVIDENT MUTUAL INVESTMENT ADVISORS LIMITED 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. PROVIDENT MUTUAL LIFE ASSURANCE LIMITED 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 PROVIDENT MUTUAL NOMINEES LIMITED - a parent company which wholly owned the company making the return, or PROVIDENT MUTUAL PLAN MANAGERS LIMITED - another wholly owned subsidary of the same parent company. PROVIDENT MUTUAL STEVENAGE ESTATES LIMITED PROVIDENT MUTUAL UNIT TRUST MANAGERS LIMITED STEVENAGE YTS LIMITED

Other relevant directorships 226742 Company Number General Accident Life Assurance Limited **Company Name** SCOTT ROBERT AVISSON **Directors Name** GENERAL ACCIDENT PLC Directors only. Other directorships INSURANCE DATABASE SERVICES LIMITED **NOTES** PLANT SAFETY LIMITED 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. PLANT SAFETY PENSION TRUSTEES 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. for names not used since the age of 18 or for at least 20 years PROVIDENT MUTUAL LIFE ASSURANCE 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 SELECTDIRECT LIMITED Other directorships. THE LOSS PREVENTION COUNCIL 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. THE MOTOR INSURANCE REPAIR RESEARCH CENTRE 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 a parent company which wholly owned the company making the return, or - another wholly owned subsidary of the same parent company.

Other relevant directorships Company Number 226742 Company Name General Accident Life Assurance Limited **URMSTON MICHAEL NORRIS Directors Name** GENERAL ACCIDENT MANAGED PENSION FUNDS LIMITED Directors only. Other directorships GENERAL ACCIDENT PEP MANAGERS LIMITED **NOTES** GENERAL ACCIDENT TRUSTEES LIMITED 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. NZI LIFE IRELAND 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. - for names not used since the age of 18 or for at PROVIDENT MUTUAL LIFE ASSURANCE LIMITED 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 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 a parent company which wholly owned the company making the return, or - another wholly owned subsidary of the same parent

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)
	£100 ORD	10,000	£ 1,000,000.00
	Totals	10,000	£ 1,000,000.00
List of past and present members (Use attached schedule where appropriate) A full list is required if one was not	There were no changes	s in the period	
included with either of the last two returns. (see note 10)	A list of changes is end	on pape	r in another format
	A full list of members i	s enclosed X	
Elective resolutions (Private companies only) (See note 11)	If at the date of this re	turn an election is in fo annual general meetin	rce to dispense with gs, mark this box
	If at the date of this re laying acc	turn an election is in fo counts in general meetir	rce to dispense with gs, mark this box
Certificate	I certify that the inform knowledge and belief.	nation given in this retu	rn is true to the best of my
Signed	P. Cot	Dat	e 24/n/96,
Please delete as appropriate.	a director/secretary		
When you have signed the return send it with the fee to the Registrar of Companie Cheques should be made payable to Companies House.	This return includ	es [enter number]	continuation sheets.
Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should contact if there is any query.	P M WHITE, GENERAL ACCIDEN	NT PLC, PITHEAVLIS, PERTH, PH2	ONH
contact if there is any query.		Tel 01738 895	328
	DX number	DX exchange	