

Please complete in typescript, or in bold black capitals.

363a

Annual Return	An	nua	ΙRε	etu:	rn
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Company Number

226742

Company Name in full





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

Month Day Year 10 1998 01

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
01	10	1999

2 ROUGIER 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

YO1 2HR

Postcode

YORK

Principal business activities

(See note 4)

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

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

6601		,, <u>a</u> ,	
			-
	<u> </u>	 	



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 Page 1

Register of I	embers i	s not kept at the					Para
		Post town			····		
		FOST TOWN]	
		County / Region				Postcode	
Register of I	Deben	iture holders					
(See note 6) If there is a registe							
and it is not kept a state here where it	t the regi	istered office,					
		Post town					
		County / Region		· · · · · · · · · · · · · · · · · · ·		Postcode	
Company ty	na /Sac	a noto 71					
	-	. Hote 1)		٦			
Public limited compa	ny						
Private company limi	ted by sha	ares	X				
Private company limi share capital	ted by gua	arantee without					
Private company limi section 30	ted by sha	ares exempt under	Please mark the appropriate box				
Private company limi under section 30	ted by gua	arantee exempt					
Private unlimited con	npany with	share capital					
Private unlimited con	npany with	nout share capital					
Company Se	ecreta	I ry (see notes 1-5)	Details of	a new compa	ny secretary	y must be notifi	ed on form 288a.
(Please photocopy this area to provide details of joint	Name	* Style / Title	MR			*Honours etc	FCIS, MAAT
secretaries).		Forename(s)	PHILIP MA	RTIN			
* Voluntary details.		Surname	WHITE		***************************************		
	Pre	vious forename(s)					
	Pre	evious surname(s)			· · · · · · · · · · · · · · · · · · ·		
	Addre	\$S	19 STAFFO	ORD CLOSE			
Usual resident	tial			***			
address must be given. In the case	9	Post town	CHAFFOR	D HUNDRED		*	
corporation, give registered or prin	the	County / Region	ESSEX			Postcode	RM16 6ND
office address.		Country	ENGLAND			··-,.	

Directors (se			Details of new director	rs must be notified on form	288a		
Piease list direc		phabetical order.	MR	7			
	Name	* Style / Title			Day	Month	Year
		* Honours etc		Date of birth	04	12	1944
		Forename(s)	WILLIAM HENDERSON				
		Surname	JACK				
	Pre	vious forename(s)					
	Pre	evious surname(s)		•			
	Address	5	DALMORE, ARDCHOILLE	PARK			
Usual resider							···
address must given. In the case	se of a	Post town	PERTH				
corporation, giver registered or pri office address.		County / Region		Postcode	PH2 7	TL	
omec address.		Country		Nationality	BRITIS	3H	
	Busines	s occupation	MANAGER		<u> </u>		
	Other di	irectorships	See attached list			·	<u>.</u>
* Voluntary details.						P+1	
							
	Name	* Style / Title	MR		Day	Month	Year
		* Honours etc	AAII	Date of birth	06	01	1942
		Forename(s)	ROBERT AVISSON				
		Surname	SCOTT				
	Prev	vious forename(s)					
	Pre	vious surname(s)					
	Address	5	GLEBE HOUSE, AUCHTER	RARDER ROAD		···	···
Usual resider address must l						***	
given. In the cas corporation, give	se of a	Post town	DUNNING		7.5		- <u>-</u>
registered or pri office address.	incipal	County / Region	PERTHSHIRE	Postcode	PH2 0F	₹J	
		Country		Nationality	AUSTF	RALIA	
	Busines	s occupation	GROUP CHIEF EXECUTIV	E			
		s occupation rectorships	GROUP CHIEF EXECUTIV	E]

Directors (see			Details of new directors	s must be notif	ied on form	288a.			
Please list direct			MR						
:	Name	* Style / Title	1911 \		F	Day	Month	Year	
		* Honours etc	BSC MBA FIA FIAA AAI	Da	te of birth	19	03	1944	
		Foreneme(s)	PHILIP JOHNSON						
		Surname	TWYMAN						
	Pre	vious forename(s)							
		Previous surname							
	Addres	s	61 ROWAN LODGE, KENS	INGTON GREEN					
Usual residen	tial		MARLOES ROAD						
address must be given. In the case		Post town	LONDON						
corporation, give registered or prin	re the rincipal	ed or principal	County / Region			Postcode	W8 5U	J	
office address.		Country	ENGLAND						
	Nationa	ality	AUSTRALIA						
Business occupation			ACTUARY/FINANCE DIRECTOR						
	Other d	lirectorships	See attached list						
				1					
	Name	* Style / Title	MR		-	Day	Month	Year	
		* Honours etc	BA, FIA	Date of birth		20	03	1949	
		Forename(s)	MICHAEL NORRIS						
		Surname	URMSTON						
	Pre	evious forename(s)			<u> </u>				
		Previous surname							
	Addres	s	THE COACH HOUSE, FULFORD PARK						
Usual resider	ntial		FULFORD						
address must be given. In the case	be	Post town	YORK						
corporation, give registered or pri		County / Region			Postcode	YO1 4	QE		
office address.		Country							
	Nationa	ality	BRITISH						
	Busine	ss occupation	ACTUARY						
	Other o	directorships	See attached list						
* Voluntary details.									

	Other relevant directorships
Company Number	226742
Company Name	General Accident Life Assurance Limited
Directors Name	JACK WILLIAM HENDERSON
† Directors only. † Other directorships	CGU LINKED LIFE ASSURANCE LIMITED
	ENGLISH ASSURANCE LIMITED
NOTES	GA PROPERTY SERVICES 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. Give previous forenames or surname(s) except: - for a married woman, the name by which she was	GA UNIT TRUST MANAGERS LIMITED
known before marriage need not be given. - for names not used since the age of 18 or for at	GENERAL ACCIDENT FINANCIAL SERVICES 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	GENERAL ACCIDENT LIFE DEVELOPMENTS LIMITED
to it.	GENERAL ACCIDENT LIFE HOLDINGS LIMITED
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.	GENERAL ACCIDENT LIFE SERVICES 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	GENERAL ACCIDENT PENSIONS MANAGEMENT LIMITED
- dormant	GENERAL ACCIDENT PEP MANAGERS LIMITED
 a parent company which wholly owned the company making the return, or 	
 another wholly owned subsidiary of the same parent company. 	GENERAL ACCIDENT STAFF PENSION TRUSTEE LIMITED
	HALIFAX FINANCIAL SERVICES HOLDINGS LIMITED
	HALIFAX LIFE LIMITED
	HALIFAX UNIT TRUST MANAGEMENT LIMITED
	LANCASHIRE AND YORKSHIRE REVERSIONARY INTEREST CO LTD //THE
	PROVIDENT MUTUAL LIFE ASSURANCE LIMITED
	PROVIDENT MUTUAL PLAN MANAGERS LIMITED

•	Other relevant directorships
Company Number	226742
Company Name	General Accident Life Assurance Limited
Directors Name	JACK WILLIAM HENDERSON
† Directors only. † Other directorships	PROVIDENT MUTUAL UNIT TRUST MANAGERS LIMITED
	QUARRYVALE ONE LIMITED
NOTES	QUARRYVALE THREE 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. Give previous forenames or surname(s) except:	STUART WYSE OGILVIE ESTATES LIMITED
 for a married woman, the name by which she was known before marriage need not be given. 	UK TRUSTEES LIMITED
- 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 sumame 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 Nam	e General Accident Life Assurance Limited
Directors Nam	e SCOTT ROBERT AVISSON
† Directors only. † Other directorships	BRITISH INSURANCE (ATOMIC ENERGY) COMMITTEE
	CGU LINKED LIFE ASSURANCE LIMITED
NOTES Show the full forenames, NOT INITIALS. If the director	CGU PLC
or secretary is a corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential line.	CHAIN LINK 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	COMMERCIAL INSURANCE COMPANY OF IRELAND 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	COMMERCIAL UNION ASSURANCE COMPANY PLC
to it.	GA BONUS PLC
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.	GA INVESTMENT MANAGEMENT SERVICES 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	GA LEISURE LIMITED
- dormant	GAFLAC NOMINEES LIMITED
 a parent company which wholly owned the company making the return, or 	
 another wholly owned subsidiary of the same parent company. 	GENERAL ACCIDENT CREDIT SERVICES LIMITED
	GENERAL ACCIDENT EXECUTOR AND TRUSTEE COMPANY LIMITED
	GENERAL ACCIDENT FIRE AND LIFE ASSURANCE CORPORATION P.L.C.
	GENERAL ACCIDENT LIFE HOLDINGS LIMITED
	GENERAL ACCIDENT PLC

GENERAL ACCIDENT STAFF PENSION TRUSTEE LIMITED

GUARANTEE SOCIETY LIMITED /THE

•	Other relevant directorships
Company Number	226742
Company Name	
Directors Name	SCOTT ROBERT AVISSON
† Directors only. † Other directorships	INSURANCE DATABASE SERVICES LIMITED
	PLANT SAFETY LIMITED
NOTES	PLANT SAFETY PENSION 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. Give previous forenames or surname(s) except:	PROVIDENT MUTUAL LIFE ASSURANCE LIMITED
- for a married woman, the name by which she was known before marriage need not be given.	ROAD TRANSPORT & GENERAL INSURANCE COMPANY LIMITED /THE
- 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	SCOTTISH BOILER AND GENERAL INSURANCE COMPANY LIMITED
to it.	SCOTTISH GENERAL INSURANCE COMPANY LIMITED
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.	SCOTTISH INSURANCE CORPORATION 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	SELECTDIRECT LIMITED
- dormant	THE LOSS PREVENTION COUNCIL
 a parent company which wholly owned the company making the return, or 	
- another wholly owned subsidiary of the same parent company.	UK TRUSTEES LIMITED
	UNITED SCOTTISH INSURANCE COMPANY LIMITED /THE
	YORKSHIRE INSURANCE COMPANY LIMITED /THE

	Other relevant directorships
Company Number	226742
Company Name	General Accident Life Assurance Limited
Directors Name	TWYMAN PHILIP JOHNSON
† Directors only. † Other directorships	CGU LINKED LIFE ASSURANCE LIMITED
	CGU PLC
NOTES	COMMERCIAL UNION ASSURANCE COMPANY 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 residential line.	GA INVESTMENT MANAGEMENT SERVICES 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	GAFLAC NOMINEES LIMITED
A peer or individual known by a title may state the title instead of or in addition to the forenames and sumame and need not give the name by which that person was	GENERAL ACCIDENT FIRE AND LIFE ASSURANCE CORPORATION P.L.C.
known before he or she adopted the title or preceded to it.	GENERAL ACCIDENT LIFE HOLDINGS LIMITED
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.	GENERAL ACCIDENT PLC
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 STAFF PENSION TRUSTEE LIMITED
- dormant	SCOTTISH INSURANCE CORPORATION LIMITED
 a parent company which wholly owned the company making the return, or 	
 another wholly owned subsidiary of the same parent company. 	UK TRUSTEES LIMITED
	YORKSHIRE INSURANCE COMPANY LIMITED /THE

	Other relevant directorships
Company Number	226742
Company Name	General Accident Life Assurance Limited
Directors Name	URMSTON MICHAEL NORRIS
† Directors only. † Other directorships	CGU LINKED LIFE ASSURANCE LIMITED
	CGU TRUSTEES LIMITED
NOTES	ENGLISH 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. Give previous forenames or surname(s) except:	GA UNIT TRUST MANAGERS LIMITED
 for a married woman, the name by which she was known before marriage need not be given. 	GENERAL ACCIDENT LIFE SERVICES LIMITED
- 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 sumame and need not give the name by which that person was known before he or she adopted the title or preceded	GENERAL ACCIDENT MANAGED PENSION FUNDS LIMITED
to it.	GENERAL ACCIDENT PENSIONS MANAGEMENT LIMITED
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.	GENERAL ACCIDENT PEP MANAGERS 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	LANCASHIRE AND YORKSHIRE REVERSIONARY INTEREST CO LTD /THE
- dormant	PROVIDENT MUTUAL DEVELOPMENTS LIMITED
 a parent company which wholly owned the company making the return, or 	
 another wholly owned subsidiary of the same parent company. 	PROVIDENT MUTUAL INVESTMENT ADVISORS LIMITED
	PROVIDENT MUTUAL LIFE ASSURANCE LIMITED
	PROVIDENT MUTUAL NOMINEES LIMITED
	PROVIDENT MUTUAL PLAN MANAGERS LIMITED
	PROVIDENT MUTUAL STEVENAGE ESTATES LIMITED
	PROVIDENT MUTUAL UNIT TRUST MANAGERS LIMITED

lssued 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 in the period		
included with either of the last two returns. (see note 10)	A list of changes is encl	on paper	in another format
	A full list of members is	enclosed X	
Elective resolutions (Private companies only) (See note 11)	If at the date of this retu	rn an election is in force annual general meeting	•
	If at the date of this retu laying acco	rn an election is in force ounts in general meeting	
Certificate	I certify that the information knowledge and belief.	tion given in this return is	s true to the best of my
Signed	1-7	Date	14.10.98
† Please delete as appropriate.	† a -directo r/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	s (enter number)	ontinuation sheets.
Please give the name, address, telephone number, and if available,	P M WHITE, CGU PLC, ST. HELEN'S, 1 UNDERSHAFT, LONDON, EC3P 3DQ		
a DX number and Exchange, for the person Companies House should contact if there is any query.			
,	DX number	Tel 0171 662 6642 DX exchange	



Please complete in typescript, or in bold black capitals.

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

Company Number	220742			
Company Name in full	CGU Life Assurance Limited			
Name and address	Number of shares Particulars of shares or stock transferred s or amount of the date of the last return (or in the case of stock held by first return, since the incorporation of the existing members company) by at date of this (a) persons who are still members, and return. (b) persons who have ceased to be member or Number or Date of amount amount registration currently held Transferred of transfer	the		
GENERAL ACCIDENT LIFE HOLDINGS LIMITED 2 ROUGIER STREET, YORK, YO1 2HR, ENGLAND	£100 Ord 9,900			
GAFLAC NOMINEES LIMITED PITHEAVLIS, PERTH, PH2 0NH, SCOTLAND	£100 Ord 100			