

Please complete in typescript,

ms 6735 x 49 363a

ог іп воїа віаск саріт	ais.	An	nua	al Re	eturn			
Со	mpany Number	227590						
Compa	ny Name in full	The Fi	inancial T	imes Limit	ted			
* F363AD40 *							 	
Data af this water		Day	Month	Year				
Date of this return the information in the in	urn is made up to	18	05	1999				
Date of next ret	ır next return	Day	Month	Year				
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.		18	05	2000				
Registered Office Show here the address this return.		NUME	BER ONE	SOUTHW	VARK BRIDG	SE		
Any change of registered office must be notified	Post town	LOND	ON					· ·
on form 287.	County / Region							
	Postcode	SE1 9	HL					
Principal busine (See note 4) Show trade classification for the principal activity	on code number(s)	2212						
If the code number canno give a brief description of	ot be determined, principal activity.							
							 	



Form revised March 1990

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

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

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

	_						
Register of no If the register of me registered office, st							
		·					
		Post town					
	C	ounty / Region				Postcode	
Register of D)ebentu	re holders					
(See note 6) If there is a register and it is not kept at	r of debentur	re holders					
state here where it	is kept.	cu omoc,					
		Post town					
	C	ounty / Region				Postcode	
Company ty	pe (See not	te 7)					
Public limited compar	ıy						
Private company limit	ed by shares		X				
Private company limit share capital	ed by guarant	tee without					
Private company limit section 30	ed by shares	exempt under		Pleas	se mark the	appropriate box	ζ
Private company limit under section 30	ed by guarant	tee exempt	1 lease mark the appropriate box				
Private unlimited com	ipany with sha	are capital					
Private unlimited com	ıpany without	share capital					
Company Se	cretary ₍	see notes 1-5)	Details of a new o	compan	y secretary	must be notifi	ied on form 288a.
(Please photocopy this area to provide details of joint	Name	* Style / Title	MR			*Honours etc	
secretaries).		Forename(s)	GRAHAM				
* Voluntary details.		Surname	LEACH				
rotantary actuals.	Previou	ıs forename(s)			·		
	Previo	us surname(s)					
	Address		CHESTER HOUSE				
Usual resident	ial		237 UPPER CHOBH	IAM ROA	D		
address must be given. In the case	e of a	Post town	CAMBERLEY				
corporation, give registered or princoffice address.	_:	ounty / Region	SURREY			Postcode	GU15 1HB
		Country	ENGLAND				

Please list directors in	। to 5) alphabetical order.	Details of new director	s must be notified on form	288a		
Name	* Style / Title	MR		Day M	lonth	Year
	* Honours etc		Date of birth	30	09	1946
	Forename(s)	DAVID CHARLES MAURIC	E			
	Surname	BELL				
P	revious forename(s)					
F	Previous surname(s)					
Addre	ess	35 BELITHA VILLAS				
Usual residential						
address must be given. In the case of a	Post town					
corporation, give the registered or principal office address.	County / Region	LONDON	Postcode	N1 1PE		
	Country	ENGLAND	Nationality	BRITISH		
Busin	ess occupation	COMPANY DIRECTOR				
Other	directorships					
* Voluntary details.						
Name	* Style / Title	MR		Day M	1onth	Year
Name	* Style / Title * Honours etc	MR	Date of birth		onth	Year
Name	•	MR OLIVIER HENRI	Date of birth			
Name	* Honours etc		Date of birth			
	* Honours etc Forename(s)	OLIVIER HENRI	Date of birth			
Р	* Honours etc Forename(s) Surname	OLIVIER HENRI	Date of birth			
Р	* Honours etc Forename(s) Surname revious forename(s) Previous surname(s)	OLIVIER HENRI				
P Addre Usual residential	* Honours etc Forename(s) Surname revious forename(s) Previous surname(s)	OLIVIER HENRI FLEUROT				
Addres Usual residential address must be given. In the case of a corporation, give the	* Honours etc Forename(s) Surname revious forename(s) Previous surname(s)	OLIVIER HENRI FLEUROT				
P Addre Usual residential address must be	* Honours etc Forename(s) Surname revious forename(s) Previous surname(s)	OLIVIER HENRI FLEUROT 4 GARRICK HOUSE, CARR				
Addres Usual residential address must be given. In the case of a corporation, give the	* Honours etc Forename(s) Surname revious forename(s) Previous surname(s) ess Post town	OLIVIER HENRI FLEUROT 4 GARRICK HOUSE, CARR	RINGTON STREET	03		
Address Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	* Honours etc Forename(s) Surname revious forename(s) Previous surname(s) Previous surname(s) Previous forename(s)	OLIVIER HENRI FLEUROT 4 GARRICK HOUSE, CARI LONDON	RINGTON STREET Postcode	03 (W1Y 7LF		
Addres Addres Usual residential address must be given. In the case of a corporation, give the registered or principal office address. Busin	* Honours etc Forename(s) Surname revious forename(s) Previous surname(s) Post town County / Region Country	OLIVIER HENRI FLEUROT 4 GARRICK HOUSE, CARR LONDON ENGLAND	RINGTON STREET Postcode	03 (W1Y 7LF		

Please list direct	e notes 1-5 ctors in al	i) phabetical order	Details of new director	rs must be notifie	d on form	288a.				
	Name	* Style / Title	MR			Day	Month	Year		
		* Honours etc		Date	of birth	24	04	1965		
		Foreneme(s)	DOMINIC	·						
		Surname	HARDISTY				•			
	Pre	vious forename(s)								
	į	Previous surname								
	Address	S	6 COLVILLE TERRACE, I	OTTING HILL GATE		<u>.</u>				
Usual reside	ntial									
address must given. In the ca	be	Post town	LONDON							
corporation, giver registered or pro-	e the	County / Region			Postcode	W2 2B	E			
office address.		Country	ENGLAND							
	Nationa	lity	BRITISH							
	Busines	ss occupation	COMPANY DIRECTOR			,				
	Other d	irectorships								
	Name	* Style / Title	MR			Day	Month	Year		
		* Honours etc		Date	of birth	19	07	1960		
		Forename(s)	STEPHEN GUY							
		Surname	HILL							
	Pre	vious forename(s)								
	1	Previous surname								
	Address	s	23 PARKFIELDS, PUTNEY							
Usual reside	ntial									
address must	be ise of a	Post town	LONDON							
corporation, giv registered or pr office address.	e the incipal	County / Region			Postcode	SW15	6NH			
omes address.		Country	ENGLAND							
	Nationa	lity	BRITISH							
	Busines	ss occupation	COMPANY DIRECTOR							
	Other d									
	Other a	irectorships								

Directors (se	e notes 1- ctors in a	5) Iphabetical order	Details of new directo	rs must be noti	fied on form	288a.		
	Name	* Style / Title	MR			Day	Month	Year
		* Honours etc		D	ate of birth	23	09	1944
		Foreneme(s)	RICHARD PETER	-				
		Surname	LAMBERT					
	Pre	evious forename(s)		A				
		Previous surname						
	Addres	s	3 LLOYDS STREET					
Usual reside	ntial							
address must given. In the ca	se of a	Post town						-
corporation, giv registered or pr office address.	e the incipal	County / Region	LONDON		Postcode	WC1X	9AP	
onice address.		Country	ENGLAND					
	Nationa	ality	BRITISH					
	Busine	ss occupation	NEWSPAPER EDITOR				,	
	Other d	lirectorships						
	Name	* Style / Title	MR	7		Dov	Month	Voor
		* Honours etc		ַם בח	ate of birth	Day 17	Month 10	1962
		Forename(s)	RICHARD STUART	J			<u> </u>	
		Surname	LEISHMAN					
	Dre	evious forename(s)						
		Previous surname						
		Previous sumame	FORUTHEN BARK! AND					
	Addres	S	52 PUTNEY PARK LANE					
Usual reside								
address must given. In the ca	se of a	Post town	LONDON					
corporation, giv registered or pr office address.	incipal	County / Region			Postcode	SW15	5HQ	
		Country	ENGLAND					
	Nationa	ality	BRITISH					
	Busine	ss occupation	FINANCE DIRECTOR					
	Other d	lirectorships						
* Voluntary details.								

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Please list direct	e notes 1-5) tors in alp) ohabetical order	Details of new dire	ctors must be noti	nea on torm	288a.		
	Name	* Style / Title	MR			Day	Month	Year
				Da	ate of birth	21	09	1947
		Foreneme(s)	ALAN CHARLES					
		Surname	MILLER					
	Prev	vious forename(s)						
	F	Previous surname						
	Address	S	39 RUSSELL ROAD, I	MOOR PARK				
Usual residential								
address must I given. In the cas	se of a	Post town	NORTHWOOD					
corporation, give registered or pri office address.	e the ncipal	County / Region	MIDDLESEX		Postcode	HA6 2	LP	
		Country	ENGLAND					
	Nationa	lity	BRITISH					
	Busines	s occupation	FINANCE DIRECTOR					
	Other di	irectorships				·		
	Name	* Style / Title				Day	Month	Year
		* Honours etc		Da	ate of birth			
		Forename(s)						
		Surname						
	Pre	vious forename(s)						
	1	Previous surname						
	Address	s						
Usual resider address must given. In the ca	be se of a	Post town						
corporation, giv registered or pr office address.	e the incipal	County / Region			Postcode			
office address.		Country				l		
	Nationa	ility						
	Busines	ss occupation						
	Other d	irectorships						
* Voluntary details.								

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 £1	25,000,000	£ 25,000,000				
	Totals	25,000,000	£ 25,000,000.00				
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	in the period					
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	irn an election is in force annual general meeting					
	If at the date of this retu laying acco	irn 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.	tion given in this return is	s true to the best of my				
Signed	G La	Date	18 MAY 1999				
† 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	s 3 cc	ontinuation 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.	SARAH ROBINSON, NUMBER ON	NE SOUTHWARK BRIDGE, LONDON	∛, SE1 9HL				
		Tel 0171 873 3903	·				
	DX number	DX exchange					



	List of past a	ind prese	nt member:	S
Please complete in typescript, or in bold black capitals.	Schedule to	-		-
Company Number	227590			
Company Name in full	The Financial Time	s Limited		
	Number of sha or amount of stock held by existing member at date of this return.	the date first retu ers compan	e of the last return irn, since the inc iv) by	stock transferred since n (or in the case of the orporation of the members, and eased to be members.
Name and address	Number or amount currently held	Number or amount Transferred	Date of registration of transfer	Remarks
FINANCIAL TIMES GROUP LIMITED NUMBER ONE SOUTHWARK BRIDGE, LONDON, S 9HL, ENGLAND	SE1 Ord £1 25,000,000			