

BLUEPRINT

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13 24 35

3990

363a

Please complete in typescript,
or in bold black capitals.

Annual Return

CHFP010

Company Number

295258

Company Name in full

Orion Personal Insurances 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



A50 25/05/2007 718
COMPANIES HOUSE
A49 04/05/2007 433
COMPANIES HOUSE

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

Companies House, Crown Way, Cardiff, CF14 3UZ
for companies registered in England and Wales

DX 33050 Cardiff

or

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

DX 235 Edinburgh

FRIDAY

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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)

Name

* Style / Title

Mr

Forename(s)

Jeremy Peter

Surname

Small

Address

Cherry Trees, West Heath

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

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

Name

* Style / Title

Day Month Year

Date of birth

Forename(s)

Surname

Address

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

Post town

County / Region

UK Postcode

Country

Nationality**Business occupation**

* Voluntary details

Name

* Style / Title

Day Month Year

Date of birth

Forename(s)

Surname

Address

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

Post town

County / Region

UK Postcode

Country

Nationality**Business occupation**

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	14,000,000	£14,000,000 00
Totals	14,000,000	14,000,000 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

☒

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

27/04/07

† 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

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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