



363a

Annual Return

<u> </u>	on the	ally	141	4111	DCI	L,
 		NI.				

295258

Company Name in full

Orion Personal Insurances Limited



Date of this return (See note 1)

The information in this return is made up to

Day	Month	Yea
31	05	97

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	Yea
31	05	98

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.

Royal Exchánge

Post town London

County / Region

Postcode

EC3V 3LS

Principal business activities

(See note 4)

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

6603

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

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

or

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



Register of men If the register of men registered office, sta	mbers is not kept at the	Royal Exchange,				
	Post town	London				
	County / Region	EC3V 3LS	Postcod	е		
_	of debenture holders he registered offfice,					
	County / Region		Postcod	е		
share capital Private company limit section 30 Private company limit under section 30 Private unlimited com	ed by shares ed by guarantee without ed by shares exempt unde ed by guarantee exempt pany with share capital pany without share capita		ease mark the app			
(Please photocopy this area to provide	lame *Style / Title		*Honours etc	M.A.		
details of joint secretaries).	Forename(s)	John Reginald William				
* Voluntary details.	Surname	Clayton				
	Previous Forename(s)					
	Previous Surname					
Δ.	Address	Matley House,				
Usual residential address must be		Grange Lane,				
given. In the case of a corporation, give the	Post town	Little Dunmow,				
registered or principal office address.	County / Region	Essex	Postcode	СМ6 ЗНҮ		
	Country	England.				

Directors

Details of new directors must be notified on form 288a

	Name	*Style / Title							
		*Honours etc	F.C.I.I.	Date	of birth	Day 16	Month 10	Year 42	
		Forename(s)	Peter Geoffrey						
		Surname	Edwards						
	Previous	s forename(s)			::=				
	Previo	us surname(s)							
	Addres	s	8 Vere Gardens,			_			
Usual residential			The Grove, Henley Road,	-					
address must be given. In the case of	of a					-			
corporation, give th registered or princip		Post town	lpswich,						
office address	Co	ounty / Region	Suffolk	Postcode	IP1 4NZ				
I		Country	England.	Nationality British)			
	Busines	s occupation	Insurance Official						
	Other o	directorships	(See continuation sheet)						
* Voluntary details.	Name	*Style / Title							
		*Honours etc	F.C.I.S.	Date (of birth	Day 09	Month 08	Year 44	
		Forename(s)	James Thomas				<u> </u>		
		Surname	Estall						
	Previous	s forename(s)							
	Previous surname(s)								
	Addres	s	Mayfield,						
Usual residentia	I	A	2 Orchard View, Rolvenden Road,						
address must be given. In the case of									
corporation, give th registered or princip		Post town	Benenden,						
office address	Co	ounty / Region	Kent	Postcode	TN17 4E	Н			
		Country	England.	Nationality	British				
	Busines	s occupation	Managing Director-Gdn Health Ltd						
Other directorships			(See continuation sheet)						

Directors

Details of new directors must be notified on form 288a

	Name	*Style / Title				_Day	A # 41.	V	
*Honours etc		B.Sc., A.R.C.S., F.I.A.	Date of birth			Month 04	Year 50		
		Forename(s)	Peter William						
		Surname	Mason						
	Previou	s forename(s)							
	Previo	us surname(s)							
	Addres	s	81 Ashley Road,						
Usual residentia address must be given. In the case of									
corporation, give the registered or princi		Post town	Epsom,					-	
office address		ounty / Region	Surrey	Postcode KT18		5BN			
		Country	England.	Nationality	British				
	Busines	s occupation	Insurance Official						
	Other	directorships	(See continuation sheet)						
* Voluntary details.	Name * Style / Titl					Davi	N	V	
		*Honours etc	A.C.I.I.	Date o	of birth	Day 01	Month 02	48	
		Forename(s)	Andrew Michael				<u></u>		
		Surname	Omiljanczyk						
	Previou	s forename(s)							
	Previo	us surname(s)							
	Addres	s	Tail Trees,						
Usual residentia	n i		Kidmore Lane,						
address must be given. In the case of	of a						<u></u>		
corporation, give the registered or princi		Post town	Sonning Common,						
office address	Co	ounty / Region	Oxon	Postcode	RG4 9SF	1			
		Country		Nationality	British				
	Busines	s occupation	Director, UK Division, Guardian Insurance Ltd						
	Other	directorships	(See continuation sheet)						

Directors

			Details of fiew diffectors filest t	se notined of	i (Ullii Zo	oa		
	Name	*Style / Title				Day	Month	ı Year
		*Honours etc	B.A., M.I.M.C., M.Tech.	Date	of birth	13	03	46
		Forename(s)	Raymond Francis					
		Surname	Pierce					
	Previou	us forename(s)						
	Previo	us surname(s)						-
	Addres	ss	St. Wilfrid's,	-		·		
Usual residential			42 Ferndale Road,			· ·		
address must be given. In the case of	of a				-			
corporation, give the registered or principal contracts and contracts are contracted to the contract of the co		Post town	Burgess Hill,					
office address	C	ounty / R egion -	West Sussex	Postcode	RH15 OI	-IG		
egistered or princip ffice address Voluntary details.		Country	England.	Nationality	British			
	Busines	s occupation	Managing Director	<u>-</u>				
	Other directorships		(See continuation sheet)					<u> </u>
* Voluntary details.		·						
	Name	*Style / Title				_		
		*Honours etc	BA(Hons),MBA,FCII, DipM,MCIM	Date	of birth	08	Month 02	Year 59
		Forename(s)	Robert George					
		Surname	Ryan					
	Previou	s forename(s)			·			
	Previo	us surname(s)		······································		<u> </u>		
	Addres	s	13 Whadden Chase,	· · · · · · · · · · · · · · · · · · ·			-	
Usual residentia	ı							
address must be given. In the case o	fa				:			
corporation, give the registered or princip	е	Post town	Ingatestone,	<u> </u>				
office address		ounty / Region	Essex	Postcode	CM4 9HF	-		
		Country	England.	Nationality	British	· · · ·		
	Busines	s occupation	Chartered Insurer	J		·		
	Other o	directorships	(See continuation sheet)	-11 -12 -12				

Form 363a continuation sheet

Other directorships

Company Number

295258

Company Name

Orion Personal Insurances Limited

Peter Geoffrey Edwards

Other Current Directorships

James Thomas Estall

Other Current Directorships

Other Past Directorships

Healthcard Limited

Mancar Limited

Medisure Marketing and Management Limited

Peter William Mason

Other Current Directorships

Hambro Assured Care plc

Hambro Assured plc

Hambro Countrywide PLC

Andrew Michael Omiljanczyk

Other Current Directorships

Motor Insurers' Bureau

Raymond Francis Pierce

Other Current Directorships

SPARKS

Other Past Directorships

Burgess Hill School for Girls Company

Mid-Sussex Housing Association

Robert George Ryan

Other Current Directorships

Guardian Sports and Social Club (Southern) Limited

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)

	Ordinary Shares of £1.0 each	00	14000	000 £	140000	00.00
	Totals	<u> </u>	14000	000 £	140000	00.00
List of past and present m	Thorous	vere no change	s in the period	x		
A full list is required if one was no included with either of the last two				on paper	in another fo	ormat
(see note 10)	A list o	f changes is en	closed			
	A full lis	et of members i	s enclosed			
Elective resolutions (Private companies only) (see note 11)	If at the date	e of this return a ar	an election is in nnual general m	force to d neetings, <i>n</i>	ispense with nark this box	x
	If at the date	of this return a laying accour	an election is in nts in general m			x
Certificate	l certify the knowledge	hat the informa ge and belief.	tion given in th	is return is	true to the bes	t of my
† Please delete as appropriate.	Signed † a direct	Aldcun er/secretary		Date	02 JUN 19	397
When you have signed the return with the fee to the Registrar of Co Cheques should be made payable Companies House.	mpanies. Th to	nis return includ	les 1 (enter numb		nuation 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		n Royal Exchang ive	e plc			