



Companies House

for the record

Company Name

MARC FITCH FUND

# 363s Annual Return

001 911/30

- > Please check the details printed in blue on this statement.
- > If any details are wrong, strike them through and write the correct details in the "Amended details" column.
- > Please use black pen and write in capital letters.

Company Type

Private Company Limited By

Guarantee Exempt Under Sect 30

Company Number

569597

Information extracted from

Companies House records on

20th November 2005

## Section 1: Company details



A22  
COMPANIES HOUSE

\*ASAELEBNS\*

295  
30/12/2005

Ref: 569597/15/42

|   | Current details  | Amended details  |
|---|--|--|
| > Registered Office Address<br><i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>     | Greyfriars Court<br>Paradise Square<br>Oxford<br>OX1 1BE         | Address<br>_____<br>_____<br>_____<br>UK Postcode    _ _ _ _ _       |
| > Register of Members<br><i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>           | Address where the Register is held<br><br>At Registered Office   | Address<br>_____<br>_____<br>_____<br>UK Postcode    _ _ _ _ _       |
| > Register of Debenture Holders<br><i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> | Not Applicable   | Address<br>_____<br>_____<br>_____<br>UK Postcode    _ _ _ _ _       |
| > Principal Business Activities<br><i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> | SIC Code    Description<br>8042        Adult and other education | SIC CODE    Description<br>_____<br>_____<br>_____<br>_____<br>_____ |
| > Please enter additional principal activity code(s) in "Amended details" column. See notes for guidance for list of activity codes.                            |  | _____<br>_____<br>_____  |

## Section 2: Details of Officers of the Company

|   | Current details  | Amended details   |
|---|--|---|
| <b>&gt; Company Secretary</b><br><i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i><br><br><br><br><i>Particulars of a new Company Secretary must be notified on form 288a.</i> | <b>Name</b><br>Elaine Margaret PAINTIN MA DIP ARCH<br><br><b>Address</b><br>10 Market Street<br>Charlbury<br>Oxon<br>OX7 3PH   | <b>Name</b><br><br><br><input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.<br><br><b>Address</b><br><br><br><br><br><b>UK Postcode</b> _ _ _ _ _<br><b>Date of change</b> _ _ / _ _ / _ _ _ _<br><b>Date Elaine Margaret PAINTIN MA DIP ARCH</b><br><b>ceased to be secretary (if applicable)</b> _ _  |
| <b>&gt; Director</b><br><i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i><br><br><br><br><i>Particulars of a new Director must be notified on form 288a.</i>                   | <b>Name</b><br>Alan Scott BELL FSA<br><br><b>Address</b><br>38 Danube Street<br>Edinburgh<br>EH4 1NT<br><br><br><br><b>Date of birth</b> 08/05/1942<br><br><b>Nationality</b> British<br><br><b>Occupation</b> Retired | <b>Name</b><br><br><br><input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.<br><br><b>Address</b><br><br><br><br><br><b>UK Postcode</b> _ _ _ _ _<br><b>Date of birth</b> _ _ / _ _ / _ _ _ _<br><b>Nationality</b> _ _ _ _ _<br><b>Occupation</b> _ _ _ _ _<br><b>Date of change</b> _ _ / _ _ / _ _ _ _<br><b>Date Alan Scott BELL FSA ceased to be director (if applicable)</b><br>_ _ / _ _ / _ _ _ _ |

|  | Current details   | Amended details   |
|--|---|---|
| <b>&gt; Director</b><br><i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> | <b>Name</b><br><b>Dr William John BLAIR MA FSA</b>  | <b>Name</b><br><br>   |
|  | <b>Address</b><br><b>Queens College</b><br><b>High Street</b><br><b>Oxford</b><br><b>Oxfordshire</b><br><b>OX1 4AW</b>  | <input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.<br><b>Address</b><br><br>  |
|  | <b>Date of birth</b> 04/03/1955   | <b>UK Postcode</b> _ _ _ _ _<br><b>Date of birth</b> _ _ / _ _ / _ _ _ _<br><b>Nationality</b> _____<br><b>Occupation</b> _____<br><b>Date of change</b> _ _ / _ _ / _ _ _ _<br><b>Date Dr William John BLAIR MA FSA ceased to be director (if applicable)</b><br>_ _ / _ _ / _ _ _ _ |
| <i>Particulars of a new Director must be notified on form 288a.</i>  | <b>Nationality</b> British<br><b>Occupation</b> University Tutor  |   |
| <b>&gt; Director</b><br><i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> | <b>Name</b><br><b>Dr Helen FORDE MA FSA</b>   | <b>Name</b><br><br>   |
|  | <b>Address</b><br><b>Lovells</b><br><b>7 The Square</b><br><b>Kings Sutton</b><br><b>Oxfordshire</b><br><b>OX17 3RE</b> | <input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.<br><b>Address</b><br><br>  |
|  | <b>Date of birth</b> 26/05/1941   | <b>UK Postcode</b> _ _ _ _ _<br><b>Date of birth</b> _ _ / _ _ / _ _ _ _<br><b>Nationality</b> _____<br><b>Occupation</b> _____<br><b>Date of change</b> _ _ / _ _ / _ _ _ _<br><b>Date Dr Helen FORDE MA FSA ceased to be director (if applicable)</b><br>_ _ / _ _ / _ _ _ _        |
| <i>Particulars of a new Director must be notified on form 288a.</i>  | <b>Nationality</b> British<br><b>Occupation</b> None  |   |

|   | Current details  | Amended details  |
|---|--|--|
| <b>&gt; Director</b><br><i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i><br><br><br><br><br><i>Particulars of a new Director must be notified on form 288a.</i> | <b>Name</b><br>Andrew Howard MURISON<br><br><b>Address</b><br>Pootings Manor<br>Crockham Hill<br>Edenbridge<br>Kent<br>TN8 6SE<br><br><b>Date of birth</b> 27/05/1948<br><br><b>Nationality</b> British<br><br><b>Occupation</b> Retired | <b>Name</b><br><br><br><input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.<br><br><b>Address</b><br><br><br><br><br><b>UK Postcode</b> _ _ _ _ _<br><b>Date of birth</b> _ _ / _ _ / _ _ _ _<br><b>Nationality</b> _____<br><b>Occupation</b> _____<br><b>Date of change</b> _ _ / _ _ / _ _ _ _<br><b>Date</b> Andrew Howard MURISON<br>ceased to be director (if applicable)<br>_ _ / _ _ / _ _ _ _                           |
| <b>&gt; Director</b><br><i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i><br><br><br><br><br><i>Particulars of a new Director must be notified on form 288a.</i> | <b>Name</b><br>Professor David Michael PALLISER<br><br><b>Address</b><br>19 Kent Road<br>Harrogate<br>HG1 2LH<br><br><b>Date of birth</b> 10/09/1939<br><br><b>Nationality</b> British<br><br><b>Occupation</b> Retired                  | <b>Name</b><br><br><br><input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.<br><br><b>Address</b><br><br><br><br><br><b>UK Postcode</b> _ _ _ _ _<br><b>Date of birth</b> _ _ / _ _ / _ _ _ _<br><b>Nationality</b> _____<br><b>Occupation</b> _____<br><b>Date of change</b> _ _ / _ _ / _ _ _ _<br><b>Date</b> Professor David Michael<br>PALLISER ceased to be director (if<br>applicable)                _ _ / _ _ / _ _ _ _ |

## &gt; Director

If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.

Particulars of a new Director must be notified on form 288a.

## Current details

**Name**  
Dr Giles Arthington WORSLEY FSA

**Address**  
86 Cambridge Gardens  
London  
W10 6HS

**Date of birth** 26/03/1961

**Nationality** British

**Occupation** Arts Journalist

## Amended details

**Name**

☐ Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.

**Address**

**UK Postcode** \_ \_ \_ \_ \_

**Date of birth** \_ \_ / \_ \_ / \_ \_ \_ \_

**Nationality** \_ \_ \_ \_ \_

**Occupation** \_ \_ \_ \_ \_

**Date of change** \_ \_ / \_ \_ / \_ \_ \_ \_

Date Dr Giles Arthington WORSLEY FSA  
ceased to be director (if applicable)

\_ \_ / \_ \_ / \_ \_ \_ \_



Companies House

— for the record —

## 363s Annual Return Declaration

- > When you have checked all the sections of this form, please complete this page and sign the declaration below.
- > If you want to change the made up date of this annual return, please complete 2 below.

### 1. Declaration

- ☒ I confirm that the details in this annual return are correct as at the made-up-date (shown at 2 below). I enclose the filing fee of £30.

Signature

Clare A. Paine  
(Director / Secretary)

Date

17/12/2005

*This date must not be earlier than the return date at 2 below*

#### What to do now

Complete this page then send the whole of the Annual Return and the declaration to the address shown at 4 below.

### 2. Date of this return

- ☒ This AR is made up to 17/12/2005 If you are making this return up to an earlier date, please give the date here

\_\_ / \_\_ / \_\_

*Note: The form must be delivered to CH within 28 days of this date*

### 3. Date of next return

- ☐ If you wish to change your next return to a date earlier than **17th December 2006** please give the new date here:

\_\_ / \_\_ / \_\_

### 4. Where to send this form

- ☒ Please return this form to:

Registrar of Companies  
Companies House  
Crown Way  
Cardiff CF14 3UZ

OR

For members of the Hays Document  
Exchange service  
DX 33050 Cardiff

**Have you enclosed the filing fee with the company number written on the reverse of the cheque?**

### Contact Address

You do not have to give any contact information below, but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you give will be visible to searchers of the public record.

Contact Name

CRITCHLEYS

Telephone number *inc code*

01865 261100

Address

GREYFRIARS COURT  
PARADISE SQUARE  
OXFORD

DX number *if applicable*

4303

DX exchange

OXFORD

Postcode

OX1 1BE