

Return of Allotment of Shares

Please complete in typescript,
or in bold black capitals.

CHFP010

Company Number

616245

Company Name in full

Cox Broking Management Limited

Shares allotted (including bonus shares):

Date or period during which shares were allotted (if shares were allotted on one date enter that date in the "from" box)	From			To										
	Day	Month	Year	Day	Month	Year								
	1	5	0	8	2	0	0	5						
Class of shares (ordinary or preference etc)	ORDINARY													
Number allotted	10,000													
Nominal value of each share	£1.00													
Amount (if any) paid or due on each share (including any share premium)	£1,200.00													

List the names and addresses of the allottees and the number of shares allotted to each overleaf

If the allotted shares are fully or partly paid up otherwise than in cash please state:

% that each share is to be treated as
paid up

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Consideration for which the shares
were allotted

(This information must be supported by the duly
stamped contract or by the duly stamped particulars
on Form 88(3) if the contract is not in writing)

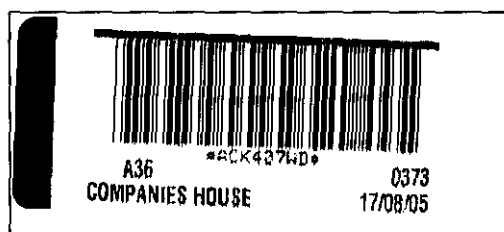
When you have completed and signed the form send it to
the Registrar of Companies at:

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

DX 33050 Cardiff

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

DX 235 Edinburgh



Names and addresses of the allottees (List joint share allotments consecutively) Company No 616245

Shareholder details	Shares and share class allotted	
Name Equity Insurance Group Limited	Class of shares allotted £1.00 ORDINARY	Number allotted 10,000
Address Library House, New Road, Brentwood, Essex, United Kingdom		
UK postcode CM14 4GD		
Name 	Class of shares allotted 	Number allotted
Address 		
UK postcode		
Name 	Class of shares allotted 	Number allotted
Address 		
UK postcode		
Name 	Class of shares allotted 	Number allotted
Address 		
UK postcode		

Please enter the number of continuation sheets (if any) attached to this form

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Signed _____

Date 15/08/05

A director / secretary / administrator / administrative receiver / receiver manager / receiver

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.

Victoria Cuggy, Asst. Company Secretary, Cox	
Insurance Holdings Plc, Library House, New Road,	
Brentwood,	Tel
DX number	DX exchange Tel: 01277 206 153

BLUEPRINT

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