

Please complete in typescript, or in bold black capitals.
CHFP001

194255/15 363a

Annual Return

Company Number		710041		
Company Name in full		NFU Mutual Insurance Pension Fund Trust Company Limited		
		1		
Date of this return The information in this return	n is made up to	Day Month Year		
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.		Tiddington Road Stratford-Upon-Avon		
Any change of registered office must be notified on form 287.	County / Region	Warwickshire C V 3 7 P B J		
Principal business Show trade classification	n code number(s)	,7487		
for the principal activity of the code number cann give a brief description of	ot be determined,			

A33 COMPANIES HOUSE 29/09/04

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

Companies House, Crown Way, Cardiff, CF14 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 memined if the register of meminegistered office, state					
	L Post town				
	L				
	County / Region L	UK Postcode			
Register of Debe If there is a register of or a duplicate of any of it, which is not ke office, state here whe	f debenture holders, such register or part _լ pt at the registered				
	Post town				
	County / Region L	UK Postcode			
Company type					
Public limited company	•				
Private company limited	by shares	X			
Private company limited by guarantee without share capital					
•	by shares exempt under	Please tick the appropriate box			
Private company limited by guarantee exempt under section 30					
Private unlimited compa	ny with share capital				
Private unlimited company without share capital					
Company Secre	tary	Details of a new company secretary must be notified on form 288a.			
(Please photocopy					
this area to provide N details of joint sec-	ame * Style / Title	Mr 			
retaries). * Voluntary details.	Forename(s)	James Damian			
^{††} Tick this box if the	Surname	e Creechan LL.B (Hons), LL.M.			
address shown is a service address for the beneficiary of a	Address ^{††}	Lifford House, Luddington Road			
Confidentiality Order granted under section					
723B of the Companies Act 1985 otherwise, give your	Post town	Stratford-upon-Avon			
usual residential address. In the case					
of a corporation or Scottish firm, give the	County / Region	Warwickshire UK Postcode C V 3 7 9 S			
registered or principal office address.	Country	L			
If a partnership give the names and addresses of the partners or the name of the partnership and office address.		710041			

Directors Please list directors in alphabetical order.		Details of new directors must be notified on form 288a		
Name		Mr		
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	3,077,1110	Day Month Year		
	Date of birth	0 1 1 0 8 1 9 5 7		
	Forename(s)	Philip Charles		
†† Tick this box if the address shown is a service address for	Surname	Bruce-Moore LL.B		
the beneficiary of a Confidentiality Order granted under section	Address ^{††}	4 Grove Road		
723B of the Companies Act 1985 otherwise, give your		Stratford-upon-Avon		
usual residential address. In the case of a corporation or	Post town	Warwickshire		
Scottish firm, give the registered or principal office address.	County / Region	UK Postcode C V 3 7 6 P E		
onice address.	Country	Nationality British		
Busir	ness occupation	Insurance Official		
* Voluntary details.				
Name Directors In the case	* Style / Title	Sir		
of a director that is a		Day Month Year		
corporation or a Scottish firm, the name is the corpo-	Date of birth	0 4 10 4 1 9 4 4		
rate or firm name.	Forename(s)	Donald Thomas Younger		
address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985	Surname	Curry C.B.E., F.R.Ag.S.		
	Address ^{††}	Middle Farm		
		Barrasford		
otherwise, give your usual residential address. In the case	Post town	Hexham		
of a corporation or Scottish firm, give the registered or principal	County / Region	Northumberland UK Postcode N E 4 8 4 D A		
office address.	Country	Nationality British		
Pusi	noce occupation	Farmer and Director		

Directors Please list directors in alphabetical order.		Details of new directors must be notified on form 288a		
N	ame * Style / Title	Mr		
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	·	Day Month Year		
	Date of birth	$\frac{0}{10} \frac{8}{10} \frac{0}{10} \frac{7}{10} \frac{1}{10} \frac{9}{10} \frac{5}{10} \frac{3}{10}$		
	Forename(s)	Ian Scott		
th Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal	Surname	Geden FCII		
	Address #	Juniper House, Badsey Road		
	Post town	Evesham		
	County / Region			
office address.	Country	Nationality British by birth		
В	usiness occupation	Managing Director		
* Voluntary details.				
N	ame * Style / Title	Mr		
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name. Tick this box if the	1	Day Month Year		
	Date of birth	13 10 /10 14 /11 19 15 10		
	Forename(s)	Sidney Philip		
address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal	Surname	Gibson FCII		
	Address ^{††}	Ashfield, Kineton Road, Pillerton Priors		
	Post town	Warwick		
	County / Region	UK Postcode CV35 0PH		
office address.	Country	Nationality British		
В	usiness occupation	Insurance Underwriting Manager		

Directors Please list directors in alphabetical order.		Details of new directors must be notified on form 288a		
	Name * Style / Title	,Mr		
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Э а	Day Month Year		
	Date of birth	$\lfloor \frac{2}{8} \rfloor \lfloor \frac{8}{10} \rfloor \lfloor \frac{7}{10} \rfloor \lfloor \frac{1}{10} \rfloor \lfloor \frac{9}{10} \rfloor \lfloor \frac{4}{10} \rfloor \lfloor \frac{3}{10} \rfloor$		
	Forename(s)	Ian David		
†† Tick this box if the address shown is a service address for	Surname	Grant C.B.E. F.R.Ag.S		
the beneficiary of a Confidentiality Order	Address ^{††}	Leal House		
granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.		Loyal Road		
	Post town	Alyth, Blairgowrie		
	County / Region			
	Country	Nationality British by birth		
!	Business occupation	Company Director		
* Voluntary details.				
ı	Name * Style / Title	<u>L</u>		
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corpo-	a	Day Month Year		
	e Date of birth	L_L_/L_L_L_L_		
rate or firm name. †† Tick this box if the	Forename(s)	L		
address shown is a service address for the beneficiary of a Confidentiality Order granted under section	Surname			
	Address #			
723B of the Companies Act 1985		1		
otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.	Post town			
	County / Region	UK Postcode		
	Country	Nationality		
,	Business occupation	1		

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 L	L5	£5
		L	_
	Totals	5	£5
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	There were no changes	in the period X	
returns.	A list of changes is enclo	on paper	in another format
	A full list of shareholders	s is enclosed	
Certificate	I certify that the information knowledge and belief.	tion given in this return	is true to the best of my
Signed	St. C	Dat	e 27/9/04
† Please delete as appropriate	† a director / secretary		
When you have signed the return send i with the fee to the Registrar of Companies Cheques should be made payable to Companies House.	. I nis return include	es (0 cc	ontinuation sheets.
You do not have to give any contact information in the box opposite but if	Secretarial Department		
you do, it will help Companies House to contact you if there is a query on the form. The contact information that you	NFU Mutual Insurance S	ociety Limited, Tiddingto	on Road
give will be visible to searchers of the public record.	Stratford-upon-Avon, Wa	arv Tel [01789 20229	9
	DX number	DX exchange	