Please complete in typescript, or in bold black capitals.

Annual Return

CHFP010

Company Number | 727135

Company Name in full

Grosvenor	(Insurances)	Limited	
			

Date of this return

The information in this return is made up

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.

Any change of registered office must be notified on form 287.

Post town

London

County / Region

UK Postcode | W1K 3JP

Principal business activities

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

70 Grosvenor Street

if the code number cannot be determined, give a brief description of principal activity.



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

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

DX 33050 Cardiff

Register of members f the register of members is he registered office, state h kept.		UK Postcode		
Register of Debenture f there is a register of debe or a duplicate of any such re of it, which is not kept at the office, state where it is kept	nture holders, egister or part e registered			
C	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 under section 30 Private unlimited company with share capital Private unlimited company without share capital		Please tick the appropriate box		
Company Secretary		Details of a new company secretary must be notified on form 288a.		
(Please photocopy this area to provide details of joint secretaries).	* Style / Title Forename(s)	L Tonathan Oahanna		
* Voluntary details. If a partnership give	Surname			
the names and addresses of the	Camano			
partners or the name Address of the partnership and office address.		White Roding, 104 Warwick Park		
Usual residential address must be	Post town	Tunbridge Wells		
given. In the case	County / Region	Kent UK Postcode TN2 5EN		
give the registered or principal office	Country	England		
address.				

BLUEPRINT 2000

Directors Please list directors in alphabetical order.		Details of new directors must be notified on form 288a		
N	ame * Style / Title	1		
.		Day Month Year		
Directors In the case of a director that is a corporate	Date of birth	0 4 0 4 1 9 5 5		
or a Scottish firm, the name is the	Forename(s)	Jeremy Henry Moore		
corporate or firm name.	Surname	Newsum		
Address		Priory House, 59 Station	Road	
Usual residential address must be				
given. In the case of a corporation,	Post town	Swavesey		
give the registered or principal office	County / Region	Cambs	UK Postcode CB4 5QJ	
address.	Country	England	Nationality British	
	Business occupation	Chartered Surveyor		
* Voluntary details.				
N	lame * Style / Title			
Directors In the		Day Month Year		
case of a director that is a corporate	Date of birth	0 3 0 2 1 9 4 9		
or a Scottish firm, the name is the	Forename(s)	Jonathan Osborne		
corporate or firm name.	Surname	Hagger		
Address		White Roding, 104 Warwic	k Park	
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.				
	Post town	Tunbridge_Wells		
		Kent	UK Postcode TN2 5EN	
	Country	England	Nationality British	
	Business occupation	Chartered Accountant		



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			£3.00
	·		
	Totals	3	3.00
List of past and present sharel	nolders		
(use attached schedule where appropriate) A full list is required if one was not included with either of the last two	There were no change:	s in the period X on paper] er in another format
returns.	A list of changes is end		
	A full list of shareholde	ers is enclosed	
Certificate	I certify that the inform knowledge and belief.	ation given in this return i	s true to the best of my
			201-135
Sigr	ned Amr	Dat	e 29/7/05
† Please delete as appropriate.	† a director / secretary	,	
When you have signed the return send with the fee to the Registrar of Companies. Cheques should be made payable to Companies House.	it This return inc	cludes 0 (enter number)	continuation sheets.
Please give the name, address, telepho		ill /J Ball, Grosveno	or Limited,
number and, if available, a DX number and Exchange of the person Companie	s 70 Grosvenor Str	reet, London W1K 3JI	2
House should contact if there is any qu	ery.	Tel: 020 7408 0	
BLUEPRINT	DX number	DX exchange	