

Please complete in typescript, or in bold black capitals.

CHFP029

Annual Return

363a

000260/300

Company Number		0803979		
Compan	y Name in full	CHARTERED TRUST MARINE LIMITED		
Date of this return The information in this return	•	Day Month Year		
Date of next return If you wish to make your to a date earlier than the of this return please show Companies House will the at the appropriate time.	next return anniversary w the date here.	Day Month Year		
Registered Office Show here the address this return.	at the date of	25 GRESHAM STREET		
Any change of registered office must be notified on form 287.	Post town County / Region UK Postcode	LONDON ECC2V7HN		
Principal business	s activities			
Show trade classification for the principal activity		7415		
If the code number can give a brief description				



Form revised September 1999

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

DX 235 Edinburgh

Register of mer the register of memb egistered office, state	ers is not kept at the	
	Post town	L
	County / Region	UK Postcode
Register of Del f there is a register of or a duplicate of any s of it, which is not kept office, state here when	such register or part at the registered	L NVA
	County / Region	UK Postcode
Company type		
Private company limited	hyphoron	x
Private company limited share capital	•	
Private company limited section 30	by shares exempt under	Please tick the appropriate box
Private company limited under section 30	by guarantee exempt	
Private unlimited compa	any with share capital	
Private unlimited compa	any without share capital	
Company Sec (Please photocopy this area to provide details of joint sec- retaries).	r etary Name * Style / Title	Details of a new company secretary must be notified on form 288a.
* Voluntary details.	Forename(s	DEBORAH ANN
If a partnership give the names and addresses of the part-	Surname(s) SAUNDERS
ners or the name of the partnership and office address.	Address	179 GLADBECK WAY
Usual residential address must be		ENFIELD CHASE
given. In the case of a corporation, or a	1 031 1011	n ENFIELD
Scottish firm, give the registered or principal office address.	County / Regio	n MIDDLESEX UK Postcode E N 2 7 E N
	Counti	
		Page 2

Details of new directors must be notified on form 288a **Directors** Please list directors in alphabetical order. IMR. * Style / Title Name Day Month Year Directors In the case of a director that Date of birth 0 (1 is a corporation or a Scottish firm, the name is the corpo-JOHN LEWIS Forename(s) rate or firm name. Surname | DAVIES 68 THE PLAIN **Address** Usual residential address must be given. In the case of a + EPPING Post town corporation or a Scottish firm, give the County / Region | ESSEX UK Postcode | C | M | 1 | 6 registered or principal office address.) ENGLAND BRITISH Country Nationality Business occupation | DIRECTOR * Voluntary details. * Style / Title | MR. Name Day Month Year Directors In the case of a director that Date of birth]0 |8 is a corporation or a Scottish firm, the

name is the corpo-MICHAEL PETER Forename(s) rate or firm name. KILBEE Surname 2 WESTDENE WAY Address Usual residential address must be given. In the case of a WEYBRIDGE Post town | corporation or a Scottish firm, give the County / Region SURREY UK Postcode (K | T | 1 | 3 registered or principal office address. BRITISH Nationality Country

Business occupation | DIRECTOR

Directors

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

	Name	* Style / Title	MR.				
Directors In the			Day Month	Year			
ase of a director that a corporation or a acottish firm, the	•	Date of birth	1 1 / 0 5 /	1 9 5 1			
ame is the corpo- ate or firm name.		Forename(s)	DAVID KEITH				
		Surname	POTTS				
	Address	:	23 WOODCHESTER	PARK, KNOTTY	GREEN		
Jsual residential address must be			L				
given. In the case of a corporation or a	a	Post town	BEACONSFIELD				
Scottish firm, give the egistered or principa office address.		ounty / Region	BUCKS		UK Postcode	H P 8	2 T U
moc address.		Country	Ĺ		Nationality	BRITISH	
	Busine	ss occupation	DIRECTOR				
	Name	* Style / Title	L				
Directors In the case of a director this a corporation or a		Date of birth	Day Month	Year			
Scottish firm, the name is the corporate or firm name.		Forename(s)					
		Surname	L				
	Addres	ss	L				
Usual residential				·			
address must be given. In the case of corporation or a	of a	Post towr) [
Scottish firm, give t registered or princil office address.		County / Region			UK Postcoo		_
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	Busin	ess occupatio	1				

Aggregate Issued share capital (e.g. Ordinary/Preference) **Nominal Value** shares issued Enter details of all the shares in issue (i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock) at the date of this return. ORD SHARES OF £1 10,000 10,000.00 Totals 10,000 ٤ 10,000.00 List of past and present shareholders (Use attached schedule where appropriate) There were no changes in the period A full list is required if one was not included with either of the last two returns. on paper in another format A list of changes is enclosed A full list of shareholders is enclosed Certificate I certify that the information given in this return is true to the best of my knowledge and belief. Signed Date April 2005 [†] Please delete as appropriate. † a director/secretary When you have signed the return send it This return includes continuation sheets. with the fee to the Registrar of Companies. (enter number) Cheques should be made payable to Companies House. Please give the name, address, telephone number, and if available, a DX number and Exchange, for MISS D.A. SAUNDERS, 25 GRESHAM STREET, LONDON, EC2V 7HN the person Companies House should contact if there is any query. Tel | 020 7356 2014 DX exchange DX number

Number of

Class



List of past and present shareholders Schedule to form 363a

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Company Number	0803	979
Company Name in full	CHA	RTERED TRUST MARINE LIMITED
	>	Changes to shareholders particulars or details of the amount of stock or shares transferred must be completed each year
		You must provide a "full list" of all the company shareholders on:
		 The company's first annual return following incorporation;
		 Every third annual return after a full list has been provided
	A	List the company shareholders in alphabetical order or provide an index List joint shareholders consecutively

	Class and	Shares or amount of stock transferred (if appropriate)			
Shareholders' details	number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer		
Name	ord shares of £1				
L BLACK HORSE LIMITED	10,000				
Address			}		
25 GRESHAM STREET, LONDON, ENGLAND			1		
<u> </u>					
LUC Davida					
UK Postcode LE LC L2 LV L7 LH LN					
Name					
Address					
L					
<u> </u>					
<u> </u>	-				
UK Postcode					
Name					
L	_				
Address					
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UK Postcode	-				
UK Postcode LLLL LLL					