



Please complete in typescript,
or in bold black capitals.

LTSB
E165+11
061903

363a

Annual Return

CHFP029

Company Number

1132760

Company Name in full

LLOYDS TSB LIFE ASSURANCE COMPANY LIMITED

Date of this return (See note 1)

The information in this return is made up to

Day Month Year

2	3	0	3	2	0	0	0
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Date of next return (See note 2)

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

2	3	0	3	2	0	0	1
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Registered Office (See note 3)

Show here the address at the date of
this return.

71 LOMBARD STREET

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

Post town

LONDON

County / Region

Postcode

EC3P 3BS

Principal business activities

(See note 4)

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

6601

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, CF4 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 members (See note 5)

If the register of members is not kept at the registered office, state here where it is kept.

Post town

County / Region

Postcode

Register of Debenture holders(See note 6)

If there is a register of debenture holders and it is not kept at the registered office, state here where it is kept.

Post town

County / Region

Postcode

Company type (See note 7)

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 unlimited company with share capital

Private unlimited company without share capital

X

Please mark the appropriate box

Company Secretary (see notes 1-5)**Details of a new company secretary must be notified on form 288a.**

(Please photocopy this area to provide details of joint secretaries).

Name

* Style / Title

MS

*Honours etc

Forename(s)

SHARON NOELLE

Surname

O'CONNOR

* Voluntary details.

Previous forename(s)

Previous surname(s)

Address

176 BLAGDON ROAD

Usual residential address

must be given. In the case of a corporation, give the registered or principal office address.

Post town

County / Region

Country

NEW MALDEN

SURREY

ENGLAND

Postcode

KT3 4AL

Directors (see notes 1 to 5)
Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

Name	* Style / Title	MR.		Day	Month	Year							
	* Honours etc			Date of birth	1	5	0	2	1	9	5	0	
	Forename(s)	TREVOR JOHN											
	Surname	JONES											
	Previous forename(s)												
	Previous surname(s)												
Address	11 ROPER CLOSE, PARKWOOD												
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post town	RAINHAM											
	County / Region	KENT					Postcode	ME8 9QX					
	Country						Nationality	BRITISH					
Business occupation	DIR RISK & CHIEF COM. OFFICER												
Other directorships													
* Voluntary details.													

Name	* Style / Title	MR.		Day	Month	Year							
	* Honours etc			Date of birth	0	4	1	0	1	9	5	0	
	Forename(s)	GEOFFREY											
	Surname	PIGOTT											
	Previous forename(s)												
	Previous surname(s)												
Address	COACH HOUSE, OLDBURY LANE												
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post town	IGHTHAM											
	County / Region	KENT					Postcode	TN15 9DG					
	Country						Nationality	BRITISH					
Business occupation	NATIONAL SALES DIRECTOR												
Other directorships													

Directors (see notes 1-5)
Please list directors in alphabetical order

Details of new directors must be notified on form 288a.

Name	* Style / Title	MR.	Day	Month	Year
	* Honours etc		Date of birth		
			1	8	1 1 1 9 5 1
	Forename(s)	ROY JOHN			
	Surname	SPRAGG			
	Previous forename(s)				
	Previous surname				
Address	BROADWAY COTTAGE, PLUCKLEY ROAD				
	CHARING				
	Post town	NR. ASHFORD			
	County / Region	KENT	Postcode	TN27 0AQ	
	Country				
Nationality	BRITISH				
Business occupation	FINANCE DIRECTOR, ACTUARY				
Other directorships					

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

Name	* Style / Title	MR.	Day	Month	Year
	* Honours etc		Date of birth		
			1	2	0 8 1 9 5 4
	Forename(s)	IAN DAVID			
	Surname	THOMPSON			
	Previous forename(s)				
	Previous surname				
Address	65 HARROW ROAD, HEMPSTEAD				
	Post town	GILLINGHAM			
	County / Region	KENT	Postcode	ME7 3QA	
	Country				
Nationality	BRITISH				
Business occupation	DIRECTOR				
Other directorships					

* Voluntary details.

Issued share capital (see note 9)
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)

ORD SHARES OF £1	16,000,000	£ 16,000,000.00
Totals	16,000,000	£ 16,000,000.00

List of past and present members

(Use attached schedule where appropriate)

A full list is required if one was not
included with either of the last two
returns.

(see note 10)

There were no changes in the period

☐

on paper in another format

A list of changes is enclosed

☐
☐

A full list of members is enclosed

☒
☐

Elective resolutions

(Private companies only)

(See note 11)

If at the date of this return an election is in force to dispense with
annual general meetings, mark this box

☒


If at the date of this return an election is in force to dispense with
laying accounts in general meetings, mark this box

☒

Certificate

I certify that the information given in this return is true to the best of my
knowledge and belief.

Signed



Date

05/04/00

† Please delete as appropriate.

† a director/secretary

When you have signed the return send it
with the fee to the Registrar of Companies.
Cheques should be made payable to
Companies House.

This return includes

(enter number)

continuation sheets.

Please give the name, address,
telephone number, and if available,
a DX number and Exchange, for
the person Companies House should
contact if there is any query.

MS. S.N. O'CONNOR, 71 LOMBARD STREET, LONDON, EC3P 3BS

Tel 020 7 356 1034

DX number

DX exchange



CHFP029

Company Number

1132760

Company Name in full

LLOYDS TSB LIFE ASSURANCE COMPANY LIMITED

Particulars of shares or stock transferred since the date of the last return (or in the case of the first return, since the incorporation of the company) by

- (a) persons who are still members, and
- (b) persons who have ceased to be members.

Date of registration of transfer

Name and address

Remarks

LLOYDS TSB FINANCIAL SERVICES LIMITED
71 LOMBARD STREET, LONDON, EC3P 3BS,
ENGLAND

ord shares of £1
16,000,000
