



SECRETARIAT

Please complete in typescript,
or in bold black capitals.

CHFP029

363a

LLTSB LIS.

000064

Annual Return

Company Number 1132760

Company Name in full LLOYDS TSB LIFE ASSURANCE COMPANY LIMITED

Date of this return

The information in this return is made up to

Day Month Year

2 3 / 0 3 / 2 0 0 2

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

2 3 / 0 3 / 2 0 0 3

Registered Office

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

UK Postcode

E C 3 P 3 B S

Principal business activities

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, 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

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A29 *A07Y8908* 0418
COMPANIES HOUSE 04/04/02

Form revised September 1999

Register of members

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

Post town

County / Region

UK Postcode

Register of Debenture holders

If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state here where it is kept.

Post town

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 unlimited company with share capital

Private unlimited company without share capital

<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Please tick the appropriate box

Company Secretary

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

Name

* Style / Title

MRS.

* Voluntary details.

Forename(s)

ALEXANDRA FRANCIS

If a partnership give the names and addresses of the partners or the name of the partnership and office address.

Surname(s)

FLETCHER

Address

106 MAIN STREET

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

Post town

ROSLIN

County / Region

MIDLOTHIAN

UK Postcode

E H 2 5 9 L T

Country

SCOTLAND

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.

Day Month Year
Date of birth 0 3 / 0 9 / 1 9 5 1

Forename(s) MICHAEL RICHARD

Surname POULDING

Address PILLHILL LODGE, MONXTON

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

Post town ANDOVER

County / Region HAMPSHIRE UK Postcode S P 1 1 8 A L

Country Nationality BRITISH

Business occupation DIRECTOR

* Voluntary details.

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.

Day Month Year
Date of birth 0 9 / 0 2 / 1 9 5 0

Forename(s) MALCOLM LESLIE

Surname SYKES

Address 8 BISHOPS COURT GARDENS

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

Post town CHELMSFORD

County / Region ESSEX UK Postcode C M 2 6 A Z

Country ENGLAND Nationality BRITISH

Business occupation BANK ASSURANCE

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.

Day Month Year
Date of birth 1 2 / 0 8 / 1 9 5 4

Forename(s) IAN DAVID

Surname THOMPSON

Address 13 DALHOUSIE CRESCENT, ESKBANK

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

Post town EDINBURGH

County / Region UK Postcode E H 2 2 3 D P

Country SCOTLAND Nationality BRITISH

Business occupation DIRECTOR

* Voluntary details.

Name * Style / Title

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 / /

Forename(s)

Surname

Address

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

Post town

County / Region UK Postcode

Country Nationality

Business occupation

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)

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

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 returns.

There were no changes in the period

☐

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

Alexandra Fletcher

Date

26/03/02

† 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.

MRS ALEXANDRA FRANCIS FLETCHER, 69 MORRISON STREET, EDINBURGH, EH3 8YF

Tel 0131 655 7230

DX number DX exchange

List of past and present shareholders Schedule to form 363a

CHFP029

Company Number 1132760

Company Name in full LLOYDS TSB LIFE ASSURANCE COMPANY 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
- List the company shareholders in alphabetical order or provide an index
- List joint shareholders consecutively

Shareholders' details	Class and number of shares or amount of stock held	Shares or amount of stock transferred (if appropriate)	
		Class and number of shares or amount of stock transferred	Date of registration of transfer
Name <u>LLOYDS TSB FINANCIAL SERVICES LIMITED</u> Address <u>71 LOMBARD STREET, LONDON, ENGLAND</u> UK Postcode <u>E C 3 P 3 B S</u>	ord shares of £1 16,000,000		
Name Address UK Postcode <u> </u> <u> </u> <u> </u>			
Name Address UK Postcode <u> </u> <u> </u> <u> </u>			