

BLUEPRINT

2000

101628 / 30.

363a

Please complete in typescript,  
or in bold black capitals.

**Annual Return**

CHFP010

**Company Number**

1198843

**Company Name in full**

ORBIT FLIGHT TRAINING LIMITED

**Date of this return**

The information in this return is made up  
to

Day		Month		Year			
2	4	0	5	2	0	0	5

**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.

2 DASHWOOD LANG ROAD, THE BOURNE BUSINESS PARK

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

**Post town**

ADDLESTONE, NR WEYBRIDGE

**County / Region**

SURREY

**UK Postcode**

KT15 2NX

**Principal business activities**

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

7487

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



A18  
COMPANIES HOUSE  
26/05/05

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

**DX 33050 Cardiff**

or

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

**DX 235 Edinburgh**

**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 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).

\* Voluntary details.

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

Name

\* Style / Title

Forename(s)

Surname

Address

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

Post town

County / Region

Country

Details of a new company secretary must be notified on form 288a.

WILLIAM PAUL

MOFFATT

4 CHENEY COURT, 104 PINWOOD AVENUE

CROWTHORNE

BERKSHIRE

UK Postcode

RG45 6RD

UNITED KINGDOM

**Directors**

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

**Directors** In the case of a director that is a corporate or a Scottish firm, the name is the corporate or firm name.

Name \* Style / Title

Day Month Year  
Date of birth 2 9 0 7 1 9 4 9

Forename(s) MICHEL JEAN CHRISTIAN

Surname CAUVIN

Address 232 RUE DE BERCY

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

Post town PARIS

County / Region UK Postcode 75012

Country FRANCE Nationality FRENCH

Business occupation FINANCE DIRECTOR

\* Voluntary details.

Name \* Style / Title

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

Forename(s) Guy

Surname DELEVACQUE

Address 18 RUE JULIETTE LAMBER

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

Post town PARIS

County / Region UK Postcode 75017

Country FRANCE Nationality French

Business occupation General Manager

**Directors***Please list directors in alphabetical order.***Details of new directors must be notified on form 288a**

**Directors** In the case of a director that is a corporate or a Scottish firm, the name is the corporate or firm name.

Name \* Style / Title \_\_\_\_\_

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

Forename(s) MALCOLM ROGER

Surname LEEVES

Address 13 MADEIRA AVENUE

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

Post town WORTHING

County / Region WEST SUSSEX UK Postcode BN11 2AT

Country England Nationality BRITISH

Business occupation COMPANY DIRECTOR

\* Voluntary details.

Name \* Style / Title \_\_\_\_\_

Day Month Year  
Date of birth 0 7 0 4 1 9 6 2

Forename(s) JUSTIN MARK

Surname WALKER

Address 1 KINGSLAND COTTAGES, GUILDFORD ROAD, ABINGER HAMMER

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

Post town DORKING

County / Region SURREY UK Postcode RH5 6SH

Country Nationality BRITISH

Business occupation COMPANY DIRECTOR

**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 shares	250,000	£250,000.00
<b>Totals</b>	250,000	250,000.00

**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

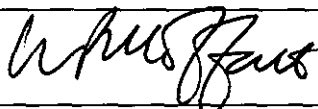
A list of changes is enclosed

☐☐

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****Date**

25 May 05

† 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

1

continuation sheets.

(enter number)

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

MICHELE COOK, 2 DASHWOOD LANG ROAD, THE BOURNE

BUSINESS PARK, ADDLESTONE, NR WEYBRIDGE, SURREY, KT15

2NX

Tel

DX number

DX exchange

BLUEPRINT

2000

# List of past and present shareholders

## Schedule to form 363a

CHFP010

Company Number 1198843

Company Name in full ORBIT FLIGHT TRAINING 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 the 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	Class and number of shares or amount of stock transferred	Shares or amount of stock transferred (if appropriate) Date of registration of transfer
<b>Name</b> THALES TRAINING AND SIMULATION LIMITED  <b>Address</b> 2 DASHWOOD LANG ROAD, THE BOURNE BUSINESS PARK, ADDLESTONE, NR WEYBRIDGE, SURREY  <b>UK postcode</b>   KT15 2NX	£1.00 Ordinary shares          Shares Held 250,000		
<b>Name</b>   <b>Address</b>     <b>UK postcode</b>			
<b>Name</b>   <b>Address</b>     <b>UK postcode</b>			