

# 363a

## **Annual Return**

**Company Number** 

1302551

Company Name in full

AMPHENOL-BORG PENSION TRUSTEES LIMITED



Date of this return (See note 1) The information in this return is made up to Day Month Year 09 11 99

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 09 11 00

Registered Office (See note 3)

Show here the address at the date of this return.

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

Post town

County / Region

Postcode

WHITSTABLE **KENT** 

**CT5 3JF** 

THANET WAY

**Principal business activities** 

(See note 4)

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

6523

If the code number cannot be determined,

give a brief description of principal

COMPANIES HOUSE 11/12/95

COMPANIES HOUSE

26/11/99

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

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

Page 1

Register of mem		100 NEW BRIDGE STREET				
If the register of mem registered office, state	bers is not kept at the					
registered office, state	l more where it is					
	Post town	LONDON				
	County / Region		Postcode	EC4V 6JA		
Register of Debe	[	100 NEW BRIDGE STREET				
If there is a register of and it is not kept at the state here where it is	e registered offfice,					
	Post town	LONDON				
	County / Region		Postcode	EC4V 6JA		
Company type	(See note 7)	٦				
Public limited company	1					
Private company limite	d by shares	x				
Private company limite share capital	d by guarantee without	Please mark the appropriate box				
Private company limite section 30	d by shares exempt unde					
Private company limite under section 30	d by guarantee exempt					
Private unlimited comp	any with share capital					
Private unlimited comp	any without share capital					
Company Secret	ary (See notes 1-5)	Details of a new company se	ecretary must be r	notified on form 288a.		
(Please photocopy this area to provide	ame *Style / Title		*Honours etc			
details of joint secretaries).	Forename(s)					
* Voluntary details.	Surname	ABOGADO NOMINEES LIMITE	D			
F	Previous Forename(s)					
	Previous Surname					
A	ddress	100 NEW BRIDGE STREET				
Usual residential						
address must be						
given. In the case of a corporation, give the	Post town	LONDON				
registered or principal office address.	County / Region		Postcode	EC4V 6JA		
	Country					

#### Form 363a/b Continuation sheet

Company Number			1302551				
Co	ompan	y Name in full	AMPHENOL-BORG PENSION TRU	JSTEES LIMITED			
Company Sec	retary						
(Please photocopy this area to provide		Details of a new company sec	retary must be	notified on form 288a.			
details of joint secretaries).	Name	*Style / Title		*Honours etc			
		Forename(s)	EDWARD CHARLES				
		Surname	WETMORE				
* Voluntary details.	Prev	vious forename(s)					
	Pre	evious surname(s)					
Address							
Usual residentia	1		4 SHELTON TERRACE				
address must be given. In the case of	of a						
given. In the case o corporation, give the registered or princip	e	Post town	TRUMBULL				
office address.		County / Region	CONNECTICUT	Postcode	06611		
		Country	USA				
		-					
	Name	*Style / Title		*Honours etc			
		Forename(s)					
		Surname					
* Voluntary details.	Pre	vious forename(s)					
	Pre	evious surname(s)					
Address							
Usual residentia	ıl				_		
address must be given. In the case of							
corporation, give the registered or princi	ie	Post town					
office address.	pai	County / Region		Postcode			
		Country					

#### Directors

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

•	Name	*Style / Title		····	<u> </u>			•		V
		*Honours etc				Date	of birth	Day	Month	Year 56
		Forename(s)	TERRY JOHN	i						
			BOLLARD							
		Surname						<b></b>		
	Previou	s forename(s)								
	Previou	us surname(s)								
	Addres	s	118	PARK	ORZU	E				
Usual residentia	I									
address must be given. In the case of	ıfa				· · · · · · · · · · · · · · · · · · ·	<u> </u>				
corporation, give the registered or principal	е	Post town	Tun	STALL						
office address		ounty / Region	KW.		<u></u>	Postcode	ne	10 11	RL	
		Country				Nationality	IR	ZSH		
	Busines	s occupation	FINAN	CE DIREC	TOR			==		
	Other	directorships	·		<u></u>			=		
* Voluntary details.		L		<u> </u>		<u></u>				
·	Name	*Style / Title						_		
		*Honours etc				Date	of birth	Day 18	Month 06	Year 43
		Forename(s)	EDWARD GE	HR	<u></u>			<u> </u>	<u></u>	
		Surname	JEPSEN		<u></u>					
	Previou	s forename(s)								
	Previo	us surname(s)								
	Addres	s	14 GALE RO	AD	= <u>-/</u> :-					
Usual residentia	1									
address must be given. In the case of	of a				<u></u>					
corporation, give the registered or principal	e	Post town	BLOOMFIELD	)						
office address	Co	ounty / Region	СТ			Postcode	06002			
		Country	USA			Nationality	USA			
	Busines	s occupation	BUSINESS E	XECUTIVE						
	Other	directorships	(See continu	ation sheet)						

## Directors

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

,	Name	*Style / Title				Day	Month	Voor
		*Honours etc		Da	te of birth	Day 24	Month 10	Year 44
		Forename(s)	MARTIN HANS					
		Surname	LOEFFLER	-				
	Previou	s forename(s)	· · · · · · · · · · · · · · · · · · ·				- ::-	
	Previous surname(s)							
	Addres	s	187 EAST SHORE RO	)AD				
Usual residentia address must be given. In the case of								
corporation, give th registered or princip		Post town	MORRIS					
office address		ounty / Region	CONNECTICUT	Postcod	06763			
		Country	USA	Nationali	austri Austri	AN		
	Busines	s occupation	BUSINESS EXECUTIV	E				
	Other	directorships	(See continuation she	et)				
* Voluntary details.	Name	*Style / Title				Day	Month	Year
		*Honours etc		Da	ite of birth			
		Forename(s)						
		Surname						
	Previou	s forename(s)						
	Previo	us surname(s)						
	Addres	s						
Usual residentia address must be		[						
given. In the case of corporation, give the	ne	Post town	<del></del>			<del></del>		
registered or princi office address		ounty / Region		Postcoo	le			
		Country		National	ty			
	Busines	s occupation						
	Other	directorships						

#### Form 363a continuation sheet

### Other directorships

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Com	pany	Number	1

1302551

**Company Name** 

AMPHENOL-BORG PENSION TRUSTEES LIMITED

			A :	$\mathbf{n}$	<b>GEH</b>	ь .	CDC	CAL
Е	יט	VV.	AI	ĸи	GEN	กม	EFO	EN

Other Current Directorships
Amphenol Holding UK, Limited

#### **MARTIN HANS LOEFFLER**

Other Current Directorships
Amphenol Holding UK, Limited

# List of past and present members

	Schedule to	form 363a and	363b					
Company Numbe	r 1302551							
Company Name in full	AMPHENOL-BOR	AMPHENOL-BORG PENSION TRUSTEES LIMITED						
	or amount of stock held by exisitng mem	stock held by first return, since the incorporation of the exisiting members company) by at date of this (a) persons who are still members, and						
Name and address	Number or amount currently held	Number or amount Transferred	Date of registration of transfer	Remarks				
AMPHENOL LIMITED								
THANET WAY, WHITSTABLE, KENT, CT5 3JF								
Ordinary Shares	10							

\* 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)

	Ordinary Sh	nares		10 £		10.00
		Totals		10 £		10.00
List of past and present me		There were no cha	inges in the perio	d		
A full list is required if one was not included with either of the last two				on paper	in anothe	<sup>-</sup> format
(see note 10)		A list of changes i	s enclosed			
		A full list of member	ers is enclosed	X		
Elective resolutions (Private companies only) (see note 11)	lf	at the date of this ret	urn an election is annual general			
	lf	at the date of this ret laying ac	urn an election is counts in general			
Certificate		I certify that the info	ormation given in ef.	this return is	s true to the I	pest of my
† Please delete as appropriate.	igned	Edward Win		Date	22 Nove	n len 1999
When you have signed the return swith the fee to the Registrar of Cor Cheques should be made payable Companies House.	npanies.	This return in	ncludes 3		inuation shee	ets
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		BAKER & McKENZI  100 NEW BRIDGE S LONDON EC4V 6J Ref: MJEH/SXC Tel: 0171 919 194	STREET IA			