

363a

Please complete in typescript, or in bold black capitals.

CHFP029

Annual Return

Company Number	1400500	-
Company Name in full	BOWMAKER CREDIT LIMITED	
Date of this return	Day Month Year	
The information in this return is made up to	0 4 / 0 3 / 2 0 0 1	
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.	Day Month Year	
Companies House will then send a form at the appropriate time.	0 4 / 0 3 / 2 0 0 2	
Registered Office Show here the address at the date of this return.	71 LOMBARD STREET	
	I	
Any change of registered office Post town must be notified	LONDON	
on form 287. County / Region		·
UK Postcode	EC3P3BS	
Principal business activities		
Show trade classification code number(s) for the principal activity or activities.	6523	
If the code number cannot be determined,	LEASING OF PLANT AND VEHICLES	
give a brief description of principal activity.		



en you have completed and signed the form please send it to the

sistrar of Companies at:

mpanies House, Crown Way, Cardiff, CF14 3UZ

DX 33050 Cardiff
companies registered in England and Wales

npanies House, 37 Castle Terrace, Edinburgh, EH1 2EB companies registered in Scotland DX 235 E DX 235 Edinburgh

Register of me If the register of me registered office, sta	embers mbers is not kept at the ate here where it is kept.	
	Post town	
	County / Region	UK Postcode
If there is a register	ebenture holders of debenture holders, y such register or part pt at the registered here it is kept.	
	Post town	
	County / Region	UK Postcode
Company type	e	
Public limited company	у	
Private company limite	•	X
Private company limite share capital	ed by guarantee without	
Private company limite section 30	ed by shares exempt under	Please tick the appropriate box
Private company limite under section 30	ed by guarantee exempt	
Private unlimited comp	pany with share capital	
Private unlimited comp	pany without share capital	
Company Sec	retary	Details of a new company secretary must be notified on form 288a.
(Please photocopy this area to provide details of joint sec-	****	Mo.
* Voluntary details.	Name * Style / Title	MS SUADON NOTE !
If a partnership give	Forename(s)	SHARON NOELLE
the names and addresses of the part- ners or the name of the partnership and		O'CONNOR 176 BLAGDON ROAD
office address.	Address	170 BLAGDON NOAD
Usual residential address must be		
given. In the case of a corporation, or a Scottish firm, give the	Post town	NEW MALDEN
registered or prin- cipal office address.	County / Region	SURREY UK Postcode K T 3 4 A L
	Country	ENGLAND
		Page 2

Directors Please list directors i	n alpha	betical order.	Details of new directors must be no	otified on form	288a	
	Name	* Style / Title	MR.		_	
Directors In the	.1		Day Month Year			
case of a director that is a corporation or a Scottish firm, the	ıı	Date of birth	2 6 / 0 1 / 1 9 4 9			
name is the corporate or firm name.		Forename(s)	JOHN LEWIS	<u>,,,=</u>		
		Surname	DAVIES			
	Addre	ess	68 THE PLAIN			
Usual residential						
address must be given. In the case of corporation or a		Post town	EPPING			
Scottish firm, give the registered or principa office address.		County / Region	ESSEX, CM16 6TW	UK Postcode		
		Country	ENGLAND	Nationality	BRITISH	
	Busin	ess occupation	DIRECTOR			
* Voluntary details.						
	Name	* Style / Title	MR.			
Directors In the			Day Month Year		_	
case of a director that is a corporation or a Scottish firm, the	at	Date of birth	0 8 / 0 4 / 1 9 4 7			
name is the corporate or firm name.		Forename(s)	MICHAEL PETER			
		Surname	KILBEE			
	Addre	ess	2 WESTDENE WAY			
Usual residential						
address must be given. In the case of corporation or a		Post town	WEYBRIDGE			
Scottish firm, give the registered or principal office address.		County / Region	SURREY	UK Postcode	K T 1 3	9 R G
		Country		Nationality	BRITISH	

Business occupation | HEAD OF LEGAL SERVICES

Details of new directors must be notified on form 288a

Directors Please list directors i	in alpha	betical order.	Details of new directors must b	e notified on	form 288a	
	Name	* Style / Title	MR		_	
Directors In the case of a director that is a corporation or a Scottish firm, the	at	Date of birth	Day Month Year [1			
name is the corporate or firm name.		Forename(s)	DAVID KEITH			
		Surname	POTTS			
	Addr	ess	23 WOODCHESTER PARK, KNOTTY	GREEN		
Usual residential address must be given. In the case of corporation or a	а	Post town	BEACONSFIELD			
Scottish firm, give the registered or principa office address.	e al	County / Region	BUCKS	UK Postcode	H P 9	2 T L
		Country		Nationality	BRITISH	
	Busir	ness occupation	DIRECTOR			
* Voluntary details.						
	Name	* Style / Title		Дана .	_	
Directors In the case of a director that is a corporation or a Scottish firm, the	at	Date of birth	Day Month Year			
name is the corporate or firm name.		Forename(s)				
		Surname				
	Addre	ess				
Usual residential address must be given. In the case of corporation or a		Post town				
Scottish firm, give the registered or principal office address.	e al	County / Region		UK Postcode	·	
		Country	1	Nationality	I	

Business occupation

Details of new directors must be notified on form 288a

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		100	£	100.00	
	Totals	L	100	£	100.00	
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	There were no changes in the period					
returns.	A list of changes is encl	osed	on paper	in another for	mat	
	A full list of shareholder	s is enclosed	a X			
Certificate	I certify that the informa knowledge and belief.	tion given in	this return is	strue to the best	of my	
Signed † Please delete as appropriate.	a director/secretary		Date	613/01		
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 include	S (enter n		ntinuation sheet	S.	
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 LOMBAR	RD STREET, LONE	DON, EC3P 3BS			
	1	Tel I	020 7356 1034			
	DX number	L	change (



List of past and present shareholders Schedule to form 363a

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Company Number	1400500
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Company Name in full | BOWMAKER CREDIT 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

	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				
LLOYDS UDT LIMITED	100				
Address					
71 LOMBARD STREET, LONDON, ENGLAND					
<u></u>					
UK Postcode <u>E C 3 P 3 B S</u>					
Name					
Address					
UK Postcode					
Name					
Address					
1					
UK Postcode					