

nm
363a

Please complete in typescript,
or in bold black capitals.

Annual Return

Company Number

1670887

Company Name in full

FINSURE PREMIUM FINANCE LIMITED



* F 3 6 3 A C 4 0 *

Date of this return (See note 1)

The information in this return is made up to

Day Month Year

16/20	03	1999
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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

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Registered Office (See note 3)

Show here the address at the date of this return.

CROWN HOUSE

145 CITY RD

LONDON

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

Post town

County / Region

Postcode

EC1V 1LP

Principal business activities

(See note 4)

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

6522

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



A30 *ALR2AFIV* 443
COMPANIES HOUSE 15/04/99

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
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

CROWN HOUSE

145 CITY RD

LONDON

Postcode

EC1V 1LP

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 note 8)

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

Name * Style / Title

Forename(s)

Surname

* Voluntary details.

Previous forename(s)

Previous surname(s)

Address

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

MR

*Honours etc

PAUL BERNARD

CASSIDY

39 Fanshawe Street, Bengeo

Hertford

County / Region

HERTS

Postcode

SG14 3AT

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

Page No. 2 (Company No. 1670887) Country

Directors (See note 8)
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	03	10 1961
	Forename(s)	PHILIP MARK			
	Surname	BUNKER			
	Previous forename(s)				
	Previous surname(s)				
Address	34 BIRCHWOOD ROAD				
	PETTS WOOD				
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post town	ORPINGTON			
	County / Region	KENT	Postcode	BR5 1NZ	
	Country		Nationality	UK	
	Business occupation	CHARTERED ACCOUNTANT			
	Other directorships	See continuation sheet			
* Voluntary details					

Name	* Style / Title	MR			
			Day	Month	Year
	* Honours etc		Date of birth	20	10 1953
	Forename(s)	JOHN			
	Surname	CARRIER			
	Previous forename(s)				
	Previous surname(s)				
Address	WOODLANDS, BACON END				
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post town	GREAT DUNMOW			
	County / Region	ESSEX	Postcode	CM6 1JP	
	Country		Nationality	UK	
	Business occupation	INSURANCE EXECUTIVE			
	Other directorships	See continuation sheet			

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 SHARES	100	£100
Totals	100	£100

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

☒

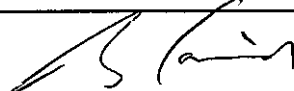
If at the date of this return an election is in force to dispense with laying accounts in general meetings, mark this box

☒

Certificate

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

Signed



Date

13th April 1999

† Please delete as appropriate

† ~~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

3

continuation sheets

(enter number)

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.

P B CASSIDY	
CROWN HOUSE	
145 CITY ROAD, LONDON EC1V 1LP	Tel 0171 216 6117
DX number	DX exchange

Directors (continued)**Details of new directors must be notified on form 288a**

Name	* Style / Title			
		Day	Month	Year
	* Honours etc	Date of birth		
		20	01	1943
	Forename(s)	HENRY STUART		
	Surname	HUGHES		
	Previous forename(s)			
	Previous surname(s)			
Address	3 BROADWATER COURT, BROADWATER DOWN			
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post town	TUNBRIDGE WELLS		
	County / Region	KENT	Postcode	TN2 5PB
	Country		Nationality	BRITISH
Business occupation	FINANCE DIRECTOR			
Other directorships	See continuation sheet			
* Voluntary details				

Name	* Style / Title			
		Day	Month	Year
	* Honours etc	Date of birth		
		14	03	1967
	Forename(s)	ANDREW THOMAS		
	Surname	JUDT		
	Previous forename(s)			
	Previous surname(s)			
Address	45 DRAYTON GARDENS, WINCHMORE HILL			
	LONDON			
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post town			
	County / Region		Postcode	N21 2NR
	Country		Nationality	BRITISH
Business occupation	CHARTERED ACCOUNTANT			
Other directorships	None			

Other Directorships

Continuation sheet number: 1

Company**Company Number**

FINSURE PREMIUM FINANCE LIMITED

1670887

Director

MR PHILIP MARK BUNKER

DIAL DIRECT INSURANCE MARKETING LIMITED
HIBERNIAN INSURANCE UK LIMITED
THE CAREFUL DRIVERS ASSOCIATION LTD

Other Directorships

Continuation sheet number: 2

Company**Company Number**

FINSURE PREMIUM FINANCE LIMITED

1670887

Director

MR JOHN CARRIER

BURTON AGENCIES (INSURANCE SERVICES) LTD
DIAL DIRECT INSURANCE MARKETING LIMITED
F RAUCH (INSURANCE BROKERS) LTD
G F BENNETT (HOLDINGS) LTD
G.F.BENNETT & CO LTD
HIBERNIAN INSURANCE UK LIMITED
NIG SHERIDAN PROPERTIES LIMITED
PRATT'S INSURANCE OFFICE
STAFFORD PARK DEVELOPMENTS LIMITED
THE CAREFUL DRIVERS ASSOCIATION LTD

Other Directorships

Continuation sheet number: 3

Company**Company Number**

FINSURE PREMIUM FINANCE LIMITED

1670887

Director

HENRY STUART HUGHES

CADOGAN HOLIDAYS LIMITED (Resigned on 30/06/1996)
CADOGAN TRAVEL LIMITED (Resigned on 30/06/1996)
GB AIRWAYS (SERVICES) LIMITED (Resigned on 30/06/1996)
HIBERNIAN INSURANCE UK LIMITED
RICHARD COHEN BOOKS LIMITED (Resigned on 01/04/1996)
WEALD OF KENT EDUCATION BUSINESS PARTNERSHIP

Please complete in typescript,
or in bold black capitals

List of past and present members Schedule to form 363a, 363b

Company Number

1670887

Company Name in full

FINSURE PREMIUM FINANCE LIMITED

Number of shares or amount of the stock held by existing members at date of this return.

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.

Name and address	Number or amount currently held	Number or amount Transferred	Date of registration of transfer	Remarks
NATIONAL INSURANCE AND GUARANTEE CORPORATION PLC CROWN HOUSE 145 CITY ROAD	ORD 99			
THE NATIONAL INSURANCE AND GUARANTEE CORPORATION PLC & R RICHARDS CROWN HOUSE 145 CITY ROAD, LONDON EC1V 1LP	ORD 0	ORD 1	10/09/1998	Transferred to THE NATIONAL INSURANCE AND GUARANTEE CORPORATION PLC
THE NATIONAL INSURANCE AND GUARANTEE CORPORATION PLC CROWN HOUSE, 145,CITY ROAD, LONDON EC1V 1LP	ORD 1			