



COMPANIES HOUSE

LB
005144
232

28 OCT 1992

363b

Please return to

THE REGISTRAR OF COMPANIES
COMPANIES HOUSE
CROWN WAY
CARDIFF
CF4 3UZ

Annual Return

of company number **CN** 1900910 **G**

company name
PHILADELPHIA NATIONAL LIMITED

This form should be completed in black.

Date of this return (See note 1)

The information in this return should be made up to a date not later than

If you are making the return up to an earlier date please show the date here.

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
DA	2 9	1 0	9 2

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DB					
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Registered Office (See note 3)

This is the address registered by Companies House as at 08/10/92

3 GRACECHURCH STREET
LONDON
EC3V 0AD

Use this space to notify a change of registered office address.

RO	
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Post Town _____

County/Region _____

Postcode _____

Principal business activities

(See note 4)

Show trade classification code number for principal activity or activities.

PA	8	6	1	0
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If the code number cannot be determined give a brief description of principal activity.

Register of members

(See note 5)

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

RM	
Post Town	
County/Region	
Postcode	

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.

RD	
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

T1	<input type="checkbox"/>
T2	<input checked="" type="checkbox"/>
T3	<input type="checkbox"/>
T4	<input type="checkbox"/>
T5	<input type="checkbox"/>
T6	<input type="checkbox"/>
T7	<input type="checkbox"/>

Please mark the appropriate box

Company Secretary (See note 8)

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

Name *Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

* Voluntary details

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

CS	MR
	CARL CHRISTIAN
	NIELSEN
	NONE
	NONE
AD	
	9 SEQUOIA PARK, HATCH END
Post Town	PINNER
County/Region	MIDDLESEX
Postcode	HAS 4BS
Country	ENGLAND

LIST OF PAST AND PRESENT MEMBERS (continued)

SCHEDULE TO FORM 363[illegible]

Directors (continued)

(See note 8)

Name *Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

Details of new directors must be notified on form 288

CD MR

FRANK

REED

NONE

NONE

AD

716 WEST MOUNT AIRY AVENUE.

Post Town PHILADELPHIA

County/Region PENNSYLVANIA

Postcode PA 19119 Country USA

Day Month Year

DO 1 5 0 3 3 5 Nationality **NA** AMERICAN

OC BANKER

OD NONE

Name *Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

CD

AD

Post Town

County/Region

Postcode Country

Day Month Year

DO Nationality **NA**

OC

OD

* Voluntary details

Directors (continued)

(See note 8)

Name *Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

Details of new directors must be notified on form 288

CD MR

DONALD

FRANKENFIELD

NONE

NONE

AD

7 LOXLEY COURT

Post Town PHILADELPHIA

County/Region PENNSYLVANIA

Postcode PA 19106 Country USA

Day Month Year DO 06 01 31 Nationality **NA** AMERICAN

OC BANKER

OD NONE

Name *Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

CD MR

MICHAEL

HEAVENER

NONE

NONE

AD

617 FOXFIELDS ROAD

Post Town BRYN MAWR

County/Region PENNSYLVANIA

Postcode PA 19010 Country USA

Day Month Year DO 31 07 43 Nationality **NA** AMERICAN

OC BANKER

OD NONE

* Voluntary details

Directors (continued)

(See note 8)

Name *Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

Details of new directors must be notified on form 288

CD MR

JOSEPH ANTHONY

McCABE

NONE

NONE

AD

30 BYWATER STREET

Post Town LONDON

County/Region

Postcode SW3 4XH

Country ENGLAND

Day Month Year

DO 01 08 63Nationality **NA** AMERICAN**OC** BANKER**OD** NONE

Name

*Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

CD MR

CARL CHRISTIAN

NIELSEN

NONE

NONE

AD

9 SEQUOIA PARK, HATCH END

Post Town PINNER

County/Region MIDDLESEX

Postcode HA5 4BS

Country ENGLAND

Day Month Year

DO 04 10 58Nationality **NA** BRITISH**OC** BANKER**OD** NONE

* Voluntary details

Directors (See note 8)

Please list directors in alphabetical order

Name *Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

Details of new directors must be notified on form 288

☒ **CD** **MR**

CHARLES

COLTMAN, III

NONE

NONE

☒ **AD**

621 NORTH CHESTER ROAD

Post Town **SWARTHMORE**

County/Region **PENNSYLVANIA**

Postcode **PA 19081** Country **USA**

Day Month Year
☒ **DO** **1** **1** **0** **1** **4** **3**

Nationality ☒ **NA** **AMERICAN**

☒ **OC** **BANKER**

☒ **OD** **NONE**

Name *Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

☒ **CD** **MR**

EUGENE PARNELL

FEINOUR

NONE

NONE

☒ **AD**

410 ROUNDHILL

Post Town **ST. DAVIDS**

County/Region **PENNSYLVANIA**

Postcode **PA 19087** Country **USA**

Day Month Year
☒ **DO** **2** **5** **0** **3** **4** **2**

Nationality ☒ **NA** **AMERICAN**

☒ **OC** **BANKER**

☒ **OD** **NONE**

* Voluntary details

Issued share capital

(See note 9)

Enter details of all the shares in issue at the date of this return.

Class	Number	Aggregate Nominal Value
<u>ORDINARY</u>	<u>19,000,000</u>	<u>£ 19,000,000</u>
_____	_____	_____
_____	_____	_____
Totals	<u>19,000,000</u>	<u>£ 19,000,000</u>

Please mark the appropriate box(es)

There were no changes in the period ☐

on paper not on paper

A list of changes is enclosed ☐ ☐

A full list of members is enclosed ☒ ☐

List of past and present members (See note 10)

(Use attached schedule where appropriate)

A full list is required if one was not included with either of the last two returns.

The last full members list was at
29/10/91**Elective resolutions**

(See note 11)

(Private companies only)

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

I enclose the fee of £32.

Signed

C. Nielsen

Secretary/Director *

(* delete as appropriate)

Date

27/10/92This return includes 2 continuation sheets.
(enter number)

To whom should Companies House direct any enquiries about the information shown in this return?

<u>C. C. NIELSEN</u>	
<u>PHILADELPHIA NATIONAL LIMITED</u>	
<u>PHILADELPHIA NATIONAL HOUSE</u>	
<u>3 GRACECHURCH ST, LONDON</u>	Postcode <u>EC3V 0AD</u>
Telephone <u>071 962 2856</u>	Extension <u>—</u>

Check List

- Have you included
- your principal business activity code?
 - dates of birth of all directors?
 - a signature of either a director or secretary?
 - a members list (if required)?
 - a cheque made payable to Companies House?