



Please complete in typescript,
or in bold black capitals.

LB 000041
f75 x 5

363a

Annual Return

Company Number

2079683

Company Name in full

TSB FINANCIAL SERVICES LIMITED



* F363AD40 *

Date of this return (See note 1)

The information in this return is made up to

Day Month Year

28 01 1998

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

28 01 1999

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

CHARLTON PLACE

County / Region

ANDOVER

HAMPSHIRE

Postcode

SP10 1RE

Principal business activities

(See note 4)

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

6601

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

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



A22 *ACHJB3PP* 90
COMPANIES HOUSE 14/02/98

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

71 LOMBARD STREET

LONDON

Postcode

EC3P 3BS

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

N/A

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

☐☒☐☐☐☐☐

Please mark the appropriate box

Company Secretary (see notes 1-5)

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

Name * Style / Title

MRS.

*Honours etc

Forename(s)

HELEN SUZANNE

Surname

RODGERS

Previous forename(s)

HELEN SUZANNE

Previous surname(s)

PORTSMOUTH

Address

HEATHER BANK

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

Post town
County / Region

Country

6 BURSTON GARDENS

EAST GRINSTEAD

Postcode

RH19 2HD

Directors (see notes 1 to 5)

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

Name	* Style / Title	<input type="text" value="MR."/>			Day	Month	Year
	* Honours etc	<input type="text"/>	Date of birth	<input type="text" value="18"/>	<input type="text" value="11"/>	<input type="text" value="1951"/>	
	Forename(s)	<input type="text" value="ROY JOHN"/>					
	Surname	<input type="text" value="SPRAGG"/>					
	Previous forename(s)	<input type="text"/>					
	Previous surname(s)	<input type="text"/>					
Address	<input type="text" value="BROADWAY COTTAGE, PLUCKLEY ROAD"/>						
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	<input type="text" value="CHARING"/>						
	Post town	<input type="text" value="NR. ASHFORD"/>					
	County / Region	<input type="text" value="KENT"/>	Postcode	<input type="text" value="TN27 0AQ"/>			
	Country	<input type="text"/>	Nationality	<input type="text" value="BRITISH"/>			
Business occupation	<input type="text" value="FINANCE DIRECTOR, ACTUARY"/>						
Other directorships	<input type="text" value="See attached list"/>						
* Voluntary details.	<input type="text"/>						

Name	* Style / Title	<input type="text" value="MR."/>			Day	Month	Year
	* Honours etc	<input type="text"/>	Date of birth	<input type="text" value="25"/>	<input type="text" value="03"/>	<input type="text" value="1951"/>	
	Forename(s)	<input type="text" value="CHRISTOPHER MICHAEL"/>					
	Surname	<input type="text" value="WISCARSON"/>					
	Previous forename(s)	<input type="text"/>					
	Previous surname(s)	<input type="text"/>					
Address	<input type="text" value="OAKHILL, 4 BLOUNTS COURT ROAD"/>						
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	<input type="text" value="ROTHERFIELD, PEPPARD"/>						
	Post town	<input type="text" value="HENLEY ON THAMES"/>					
	County / Region	<input type="text" value="OXFORDSHIRE"/>	Postcode	<input type="text" value="RG9 5HB"/>			
	Country	<input type="text"/>	Nationality	<input type="text" value="BRITISH"/>			
Business occupation	<input type="text" value="COMPANY DIRECTOR"/>						
Other directorships	<input type="text" value="See attached list"/>						
	<input type="text"/>						

Other relevant directorships

Company Number 2079683

Company Name TSB FINANCIAL SERVICES LIMITED

Directors Name SPRAGG ROY JOHN

BLACK HORSE FINANCIAL SERVICES GROUP LIMITED

BLACK HORSE FINANCIAL SERVICES LIMITED

BLACK HORSE LIFE ASSURANCE COMPANY LIMITED

LLOYDS BANK (CHANNEL ISLANDS) UNIT TRUST MANAGERS LIMITED

LLOYDS BANK UNIT TRUST MANAGERS LIMITED

† Directors only.

† Other directorships

NOTES

Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential line.

Give previous forenames or surname(s) except:
- for a married woman, the name by which she was known before marriage need not be given.

- for names not used since the age of 18 or for at least 20 years

A peer or individual known by a title may state the title instead of or in addition to the forenames and surname and need not give the name by which that person was known before he or she adopted the title or preceded to it.

Other directorships.

Give the name of every company incorporated in Great Britain of which the person concerned is a director or has been a director at any time in the past five years.

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

- dormant

- a parent company which wholly owned the company making the return, or

- another wholly owned subsidiary of the same parent company.

Other relevant directorships

Company Number	2079683
Company Name	TSB FINANCIAL SERVICES LIMITED
Directors Name	WISCARSON CHRISTOPHER MICHAEL

† Directors only. † Other directorships

AMBASSADOR INSURANCE COMPANY LIMITED

BLACK HORSE FINANCIAL SERVICES GROUP LIMITED

BLACK HORSE FINANCIAL SERVICES LIMITED

BLACK HORSE LIFE ASSURANCE COMPANY LIMITED

LLOYDS ABBEY LIFE OVERSEAS HOLDINGS LIMITED

LLOYDS BANK UNIT TRUST MANAGERS LIMITED

LLOYDS TSB FINANCIAL SERVICES HOLDINGS PLC

MANAGEMENT AS COMPETITIVE ADVANTAGE LIMITED

NOTES

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- dormant
- a parent company which wholly owned the company making the return, or
- another wholly owned subsidiary of the same parent company.

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)
ORD SHS £1	120,000	£ 120,000.00
Totals	120,000	£ 120,000.00

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

H. S. Rodgers

Date

30.1.98

† 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

(enter number)

continuation sheets.

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.

MRS. H.S. RODGERS, 71 LOMBARD STREET, LONDON, EC3P 3BS	
Tel 0171 356 1957	
DX number	DX exchange



SECRETARIAT

Please complete in typescript,
or in bold black capitals.

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

Company Number

2079683

Company Name in full

TSB FINANCIAL SERVICES LIMITED

Number of shares
or amount of
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
LLOYDS TSB GENERAL INSURANCE HOLDINGS LIMITED CHARLTON PLACE, ANDOVER, HAMPSHIRE, SP10 1RE	Ord shs £1 120,000			