

Company Number | 2129286

Please complete in typescript, or in bold black capitals.

COMPANIES HOUSE
Form revised September 1999

0/61 20/03/03

CHFP029

363a

Annual Return

Company Name in full	Norwich Union Mortgages (General) Limited				
Date of this return The information in this return is made up to	Day Month Year				
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. Companies House will then send a form at the appropriate time.	Day Month Year [3 0 / 0 3 / 2 0 0 4				
Registered Office Show here the address at the date of this return.	8 SURREY STREET				
Any change of registered office post town must be notified on form 287. County / Region UK Postcode	NORFOLK				
Principal business activities Show trade classification code number(s) for the principal activity or activities. If the code number cannot be determined give a brief description of principal activity	6522				
A27 COMPANIES HOUSE 02/04/03 A39	When you have completed and signed the form please send it to the Registrar of Companies at: Companies House, Crown Way, Cardiff, CF14 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				

DX 235 Edinburgh

Register of mem	nbers ers is not kept at the	ST HELEN'S 1 UNDERSHAFT						
egistered office, state	here where it is kept.							
	Post town	LONDON						_
	County / Region	EC3P 3DQ	UK	Postcode			LL	
Register of Deb If there is a register of or a duplicate of any s of it, which is not kept office, state here wher	debenture holders, uch register or part at the registered	ST HELEN'S 1 UNDERSHAFT						
	Post town	LONDON						
	County / Region	EC3P 3DQ	UK	Postcode	,	L	<u></u>	
Company type								
Public limited company								
Private company limited	by shares	X						
Private company limited share capital	by guarantee without							
Private company limited section 30	l by shares exempt under		Please tick the a	oppropriate b	хох			
Private company limited under section 30	d by guarantee exempt		! :					
Private unlimited compa	any with share capital							
Private unlimited compa	any without share capital							
Company Sec (Please photocopy this area to provide details of joint sec-	·		company secretai	y must be	notified o	n form :	288a.	
retaries). * Voluntary details.	Name * Style / Title							
If a partnership give	Forename(s							
addresses of the part- ners or the name of the partnership and	Surname(s	AVIVA COMPANY SECRETARIAL SERVICES LIMITED ST. HELEN'S						
omee address.	71441.000	1 UNDERSHAFT						
Usual residential address must be given. In the case of a	Post tow							
corporation, or a Scottish firm, give the registered or prin- cipal office address.				JK Postcode		3 (D	3 D	
opai onice pudiess.	•		`			<u> LT</u>	3 1 1	<u>'</u>
	Count			· × -			Page	2

Directors Please list directors ir	n alphabe		Details of new directors must be not	ified on form 2	88a	
	Name	* Style / Title	MR			
Directors In the			Day Month Year			
case of a director that is a corporation or a Scottish firm, the	t	Date of birth	1 4 / 0 8 / 1 9 5 2			
name is the corporate or firm name.		Forename(s)	MICHAEL NICHOLAS			
		Surname	BIGGS			
	Addres	s	415 UNTHANK ROAD			
Usual residential						
address must be given. In the case of corporation or a	а	Post town	NORWICH			
Scottish firm, give the registered or principal office address.		County / Region	NORFOLK	UK Postcode	N R 4	7 Q B
		Country	ENGLAND	BRITISH		
	Busine	ess occupation	INSURANCE COMPANY OFFICIAL			
* Voluntary details.						
	Name	* Style / Title	MR		_	
Directors In the case of a director the	nat		Day Month Year			
is a corporation or a Scottish firm, the		Date of birth	0 2 / 0 9 / 1 9 6 5			
name is the corporate or firm name.		Forename(s)				
		Surname	HODGES			
	Addre	ess	VALLEY HOUSE, LOW ROAD			
Usual residential			TASBURGH			
address must be given. In the case of corporation or a		Post town	NORWICH			
Scottish firm, give to registered or princi office address.	the ipal	County / Region	n NORFOLK	UK Postcod	e N R 1 5	1 L 1

Business occupation

INSURANCE COMPANY OFFICIAL

Country ENGLAND

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BRITISH

Nationality

Details of new directors must be notified on form 288a **Directors** Please list directors in alphabetical order. * Style / Title MR Name Day Month Year Directors In the case of a director that Date of birth is a corporation or a Scottish firm, the name is the corpo-**KEVIN LESLIE** Forename(s) rate or firm name. Surname SALE HOLLY HOUSE, 121 TAVERHAM ROAD **Address TAVERHAM** Usual residential address must be given. In the case of a NORWICH Post town corporation or a Scottish firm, give the registered or principal UK Postcode County / Region NORFOLK R office address. Country **ENGLAND Nationality BRITISH Business occupation** INS CO OFFICIAL * Voluntary details. * Style / Title Name Day Month Year Directors In the case of a director that Date of birth 2 is a corporation or a Scottish firm, the name is the corpo-

rate or firm name. Forename(s) PATRICK JOSEPH ROBERT Surname SNOWBALL THE OLD RECTORY, LONGHAM **Address** Usual residential address must be given. In the case of a EAST DEREHAM Post town corporation or a Scottish firm, give the registered or principal **NORFOLK UK Postcode** County / Region R 2 office address. **ENGLAND BRITISH** Country Nationality INSURANCE COMPANY OFFICIAL **Business occupation**

Class Number of Aggregate Issued share capital (e.g. Ordinary/Preference) shares issued Nominal Value Enter details of all the shares in issue (i.e. Number of shares issued at the date of this return. multiplied by nominal value per share, or total amount of stock) £1 ORDINARY 100,000 £ 100,000.00 Totals 100,000 £ 100,000.00 List of past and present shareholders There were no changes in the period (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two returns. in another format on paper A list of changes is enclosed A full list of shareholders is enclosed Certificate I certify that the information given in this return is true to the best of my knowledge and belief. **AUTHORISED SIGNATORY** FOR AND ON BEHALSIGHED Date 18 3 2003 AVIVA COMPANY † Please delete as PARTARIANISERVICES LIMITED† a director/secretary When you have signed the return send it This return includes continuation sheets. with the fee to the Registrar of Companies. Cheques should be made payable to (enter number) Companies House. Please give the name, address, telephone number, and if available, a DX number and Exchange, for GROUP SECRETARIAL, 20TH FLOOR, ST HELEN'S, 1 UNDERSHAFT, LONDON, EC3P 3DQ the person Companies House should

Tel

DX number

020 7662 8444

DX exchange

contact if there is any query.



List of past and present shareholders Schedule to form 363a

C	Н	F	P	O	2	9

Name

Address

UK Postcode

nrPU29	Company Number							
	Company Name in full							
		 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 List joint shareholders consecutively							provide an index	
						Shares or amount of stock transferred (if appropriate)		
	Shareholders' details			Class and number of sha or amount o stock held		Class and number of shares or amount of stock transferred	Date of registration of transfer	
Name Norwich	UNION INSURANCE LIMITED			£1 Ordinary	100,000			
Address								
8 SURREY	STREET, NORWICH, NORFOLK, EN	GLAND						
L							:	
UK Postco	ode <u>N R 1 3 N G</u>						:	
Name				: : :				
Address								
1						: 	1	
UK Postc	ode			:				
Name			-					
Address				-				
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