

Please complete in typescript, or in bold black capitals.

CHFP029

Annual Return



Com	pany Number	2129340		
Compan	y Name in full	LLOYDS UDT BUSINESS EQUIPMENT LIMITED		
Date of this return		Day Month Year		
The information in this return	rn is made up to	1 8 , 0 2 , 2 0 0 2		
Date of next return If you wish to make your				
to a date earlier than the of this return please show Companies House will the	w the date here.	Day Month Year		
at the appropriate time.		1 8 / 0 2 / 2 0 0 3		
Registered Office Show here the address this return.	at the date of	71 LOMBARD STREET		
Any change of				
registered office must be notified	Post town	LONDON		
on form 287.	County / Region			
	UK Postcode	EC3P3BS		
Principal business	activities			
Show trade classification for the principal activity of				
,				
If the eade number conn	at he determined	LEASING		
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, CF14 3UZ DX 33050 Cardiff		
#AZRGJST	8* 0270	for companies registered in England and Wales or		

Form revised September 1999

COMPANIES HOUSE

0379

04/03/02

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh

Page 1

Register of me If the register of mel registered office, sta	embers mbers is not kept at the atte here where it is kept. Post town County / Region	UK Postcode
If there is a register		UK Postcode
	Journy , riogian	
Company type	e	
Public limited compan	у	
Private company limite	ed by shares	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 com	pany with share capital	
Private unlimited com	pany without share capital	
Company Sec	cretary	Details of a new company secretary must be notified on form 288a.
(Please photocopy this area to provide details of joint sec- retaries).	Name * Style / Title	MS
* Voluntary details.	Forename(s)	SHARON NOELLE
If a partnership give the names and addresses of the part-	Surname(s)	O'CONNOR
ners or the name of the partnership and office address.	Address	176 BLAGDON ROAD
Usual residential		
address must be given. In the case of a corporation, or a	FOSCIOWII	NEW MALDEN
Scottish firm, give the registered or principal office address.	County / Region	SURREY UK Postcode K T 3 4 A L
	Country	ENGLAND
		Page 2

Bifectors Please list directors i	n alphabe	etical order.	Details of new director	s must be no	uned on form 2	,004	
	Name	* Style / Title	MR.			_	
Directors In the case of a director that is a corporation or a	at	Date of birth	Day Month [2 6 / 0 1 / 1	Year			
Scottish firm, the name is the corporate or firm name.		Forename(s)	JOHN LEWIS				
		Surname	DAVIES				
	Addres	ss	68 THE PLAIN				
Usual residential							
address must be given. In the case of corporation or a		Post town	EPPING				
Scottish firm, give th registered or principal office address.	e al (County / Region	ESSEX		UK Postcode	C M 1 6	6 T V
onice address.		Country	ENGLAND		Nationality	BRITISH	
	Busine	ess occupation	DIRECTOR				
* Voluntary details.							
	Name	* Style / Title	MR.			- .	
Directors In the case of a director that is a corporation or a Scottish firm, the		Date of birth	Day Month 0 8 0 4 1	Year			
name is the corpo- rate or firm name.		Forename(s)	MICHAEL PETER				
		Surname	KILBEE				
	Addres	ss	2 WESTDENE WAY				
Usual residential					· · · · · ·		, <u>, , , , , , , , , , , , , , , , , , </u>
address must be given. In the case of corporation or a	a	Post town	WEYBRIDGE				
Scottish firm, give the registered or princip office address.		County / Region	SURREY		UK Postcode	K T 1 3	9 R C
·		Country			Nationality	BRITISH	

Business occupation | DIRECTOR

Details of new directors must be notified on form 288a

Directors Please list directors in	alphabetical order.	Defails of them directors impactor	e notified on form 2004
	Name * Style / Title	MR	
Directors In the case of a director that is a corporation or a	Date of birth	Day Month Year	
Scottish firm, the name is the corporate or firm name.	Forename(s)	DAVID KEITH	
	Surname	POTTS	
	Address	23 WOODCHESTER PARK, KNOTTY	GREEN
Usual residential			
address must be given. In the case of corporation or a	1 OSL LOWI	BEACONSFIELD	
Scottish firm, give the registered or principa office address.		BUCKS	UK Postcode H P 9 2 T L
	Country	′	Nationality BRITISH
	Business occupation	DIRECTOR	
* Voluntary details.			
	Name * Style / Title	• [
Directors In the case of a director that is a corporation or a Scottish firm, the	t Date of birth	Day Month Year	
name is the corporate or firm name.	Forename(s) [
	Surname	• [
	Address	L	
Usual residential address must be			
given. In the case of corporation or a	1 031 (04)	١	
Scottish firm, give the registered or principal office address.		1	UK Postcode
	Country	۷ L	Nationality
	Business occupation	n	

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 Number of (e.g. Ordinary/Preference) shares issue			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
	L			<u> </u>
	Totals		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		paper	in another format
	A full list of shareholders	_	X	
Certificate	I certify that the informa knowledge and belief.	tion given in this re	turn is	true to the best of my
Signed	Poole	_2	Date	21/22/22
† 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 include	(enter number)	_] coi	ntinuation sheets.
Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should	MS. S.N. O'CONNOR, 71 LOMBAR	RD STREET, LONDON, EC3	P 3B\$	
contact if there is any query.		Tel 020 7356	2 4004	
	DX number	DX exchange		
	DA Hallibei		"	



List of past and present shareholders Schedule to form 363a

C	Н	F	P	n	2	g
•				v	-	

Company Number	2129340
-----------------------	---------

Company Name in full LLOYDS UDT BUSINESS EQUIPMENT 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

Shareholders' details	Class and number of shares	Shares or amount of stock transferred (if appropriate) Class and number of Date of			
Shareholders details	or amount of stock held	shares or amount of stock transferred	registration of transfer		
Name	ord shares of £1				
LLOYDS UDT LIMITED	100				
Address	į				
71 LOMBARD STREET, LONDON, ENGLAND					
			Į.		
UK Postcode <u>E C 3 P 3 B S</u>					
Name					
Address			į		
UK Postcode					
Name					
Address					
UK Postcode					