

RB5/E15/002595

Please complete in typescript,
or in bold black capitals.

Annual Return

CHFP010

Company Number

2207611

Company Name in full

Rural Insurance Group Limited

Date of this return

The information in this return is made up
to

Day		Month		Year			
2	1	1	2	2	0	0	1

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			

Registered Office

Show here the address at the date of
this return.

5 Lloyd's Avenue

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

Post town

London

County / Region

UK Postcode

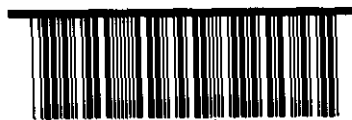
EC3N 3AE

Principal business activities

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

6603

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



A19
COMPANIES HOUSE

0678
16/01/02

When you have completed and signed the form please send it to the
Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ
for companies registered in England and Wales

DX 33050 Cardiff

or

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

DX 235 Edinburgh

Register of members

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

Post town

County / Region

UK Postcode

Register of Debenture holders

If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state where it is kept.

Post town

County / Region

UK Postcode

Company type

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 tick the appropriate box

Company Secretary

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

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

* Voluntary details.

Name

* Style / Title

Mr

Forename(s)

Mark Verity

Surname

Newell

Address

Moffat, Pains Hill, Limpsfield Chart

If a partnership give the names and addresses of the partners or the name of the partnership and office address.

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

Post town

Oxted

County / Region

Surrey

UK Postcode

RH8 0RG

Country

England

Directors

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

Directors In the case of a director that is a corporate or a Scottish firm, the name is the corporate or firm name.

Name * Style / Title | Mr

Day Month Year
Date of birth | 1 | 9 | 0 | 4 | 1 | 9 | 5 | 7

Forename(s) | Lance Douglas

Surname | Harvey

Address | 7 Bourton Mead, Flax Bourton

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

Post town | Bristol

County / Region | Avon UK Postcode | BS19 3QP

Country | United Kingdom Nationality | British

Business occupation | Company Director

* Voluntary details.

Name * Style / Title | Mr

Day Month Year
Date of birth | 0 | 4 | 1 | 1 | 1 | 9 | 6 | 1

Forename(s) | Michael Henry

Surname | King

Address | 45 Leicester Road

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

Post town | Wanstead

County / Region | London UK Postcode | E11 2DW

Country | England Nationality | British

Business occupation | Company Director

Directors*Please list directors in alphabetical order.***Details of new directors must be notified on form 288a**

Directors In the case of a director that is a corporate or a Scottish firm, the name is the corporate or firm name.

Name

* Style / Title

Mr

Day Month Year

Date of birth

1 2 0 5 1 9 6 6

Forename(s)

Philip William Henry

Surname

James

Address

Swan Building

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

Post town

26 Victoria Street

County / Region

Hamilton

UK Postcode

HM12

Country

Bermuda

Nationality

British

Business occupation

Insurance Broker

* Voluntary details.

Name

* Style / Title

Day Month Year

Date of birth

Forename(s)

Surname

Directors In the case of a director that is a corporate or a Scottish firm, the name is the corporate or firm name.

Address

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

Post town

County / Region

UK Postcode

Country

Nationality

Business occupation

Issued share capital

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, or total amount of stock)
Ordinary	1,000	£1,000.00
Totals	1,000	1,000.00

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 returns.

There were no changes in the period

☒

on paper

in another format

A list of changes is enclosed

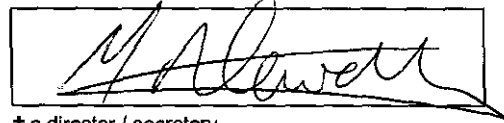
☐☐

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.

Signed



Date

14/11/02

† 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

1

continuation sheets.

(enter number)

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.

5 Lloyd's Avenue, London, EC3N 3AE, England

Tel: 0207 335 7300
Fax: 0207 335 7301

DX number _____ DX exchange _____

List of past and present shareholders Schedule to form 363a

CHFP010

Company Number | 2207611

Company Name in full | Rural Insurance Group 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 the 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	Shares or amount of stock transferred (if appropriate)		
	Class and number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer
Name Primary Group Limited Address 6th Floor, 5 Lloyd's Avenue, London UK postcode EC3N 3AE	£1.00 Ordinary Shares Held 1,000		
Name Address UK postcode			
Name Address UK postcode			