

## 752/63/3C

Please complete in typescript, or in bold black capitals.

## **Annual Return**

CHFP000

Company number

Company name in full

2305333

**IBRM INSURANCE CONSULTANTS LIMITED** 

Date of this return

The information in this return is made up to

Day Month Year

9 / 0

4 1 2

0 0\_

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 that date here. Companies House will then send a form at the appropriate time.

**Registered Office** 

Show here the address at the date of this return

Any change of registered office must be notified on form 287

Post town

County/Region

**UK Postcode** 

ONE ARLESTON WAY

SOLIHULL

9

0 <u>L 4 L H</u>

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

6603

NON-LIFE INSURANCE/REINSURANCE



10/07/2009 **COMPANIES HOUSE**  165

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 or Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX ED235 Edinburgh 1 For companies registered in Scotland

DX 33050 Cardiff

or LP-4 Edinburgh 2

07/08

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Register of members	ARBUTHNOT HOUSE, 20 RO		ROPE	MAKE -	R STREET		
If the register of members is not kept at the registered office, state here where it is kept							
Pos	st town	LONDON	١				
County/l	Region [	<del></del>					
UK Po	stcode [	E C	2	Υ	9_	<u>A</u>	R
Register of Debenture holders If there is a register of debenture holder	<b>5</b> լ	N/A					
duplicate of any such register or part of is not kept at the registered office, state	it, which		<u></u> ,				
where it is kept Pos	st town	<del></del>	<del></del>				
County/	Region (				·		
UK Po	stcode	<u> </u>	_	<u></u>		<u> </u>	
Company type		_					
Public limited company							
Private company limited by sha			<b>✓</b>				
Private company limited by gua share capital		Ĺ					
Private company limited by sha section 30 Private company limited by gua under section 30		Ļ				Pleas	e tick the appropriate box
Private unlimited company with	share capita	aJ [				<u> </u> 	
Private unlimited company with	out share ca	pital				j	
Company Secretary		Details	of a ne	w comp	any se	cretary	y must be notified on form 288a
* Voluntary details (Please photocopy Name	*Style/Title	MR					
this area to provide details of joint secretaries).	orename(s)	JEREM	Y ROBI	IN		_	
†† Tick the box if the						<del></del>	
service address for the beneficiary of a	Address †† MALLARDS, 52 MOAT ROAD						
Confidentiality Order granted under section 723B of the Companies							
Act 1985. Otherwise, give your usual residential address. In	Post town	EAST	GRINST	EAD			
the case of a corporation or Scottish firm, give the	inty/Region	WEST	SUSSE	x			
registered or principal office address.	K Postcode	<u> R</u>	<u>H</u> [1	[9	13	<u> L</u>	_ <u>[H</u>
If a partnership, give the names and addresses of the partners or the name of the partnership and office address	Country			<u>.</u>	<u></u> .	<u> </u>	
							Page 2

<b>Directors</b> Please list the directors in a	phabetical order	Details of new directors must be notified on form 288a
Voluntary details In the case of a director that is a corporation or a	nme *Style/Title	MR
Scottish firm, the name is the		Day Month Year
corporate or firm name	Date of birth	2 2 1 1 0 1 1 9 6 5
	Forename(s)	NICHOLAS MARK
	Surname	FIELDEN
†† Tick the box if the address shown is a service address for the		38 CARTBRIDGE LANE
beneficiary of a Confidentiality Order		RUSHALL
granted under section 723B of the Companies Act 1985. Otherwise,	Poet town	WALSALL
give your usual residential address. In		WEST MIDLANDS
the case of a corporation or Scottish firm, give the registered		
or principal office address.		W  S  4    1  S  B
	Country	
	Nationality	
В	usiness occupation	CHARTERED ACCOUNTANT
Directors Please list the directors in a Voluntary details In the case of a	alphabetical order	Details of new directors must be notified on form 288a  MR
Please list the directors in Voluntary details  In the case of a director that is a corporation or a		. MR
Please list the directors in a Voluntary details  In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm	ame *Style/Title	MR
Please list the directors in a Voluntary details  In the case of a director that is a corporation or a Scottish firm, the name is the	ame *Style/Title	Day Month Year  2 5 / 0 9 / 1 9 3 7
Please list the directors in a Voluntary details  In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name	ame *Style/Title  Date of birth  Forename(s)	Day Month Year  2
Please list the directors in a Voluntary details  In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name  The Tick the box if the address shown is a	Date of birth Forename(s)	Day Month Year  2 5 / 0 9 / 1 9 3 7  JEREMY ROBIN  KAYE
Please list the directors in a Voluntary details  In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name  †† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order	Date of birth Forename(s)	Day Month Year  2
Please list the directors in a Voluntary details  In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name  †† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies	Date of birth Forename(s)	MR  Day Month Year  2
Please list the directors in a Voluntary details  In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name  The Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual residential address. In	Date of birth Forename(s) Surname Address ††	Day Month Year  2
Please list the directors in a Voluntary details  In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name  It Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual	Date of birth Forename(s) Surname Address †† Post town County/Region	MR
Please list the directors in a Voluntary details  In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name  †† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual residential address. In the case of a corporation or Scottish	Date of birth Forename(s) Surname Address ††  Post town County/Region	MR
Please list the directors in a Voluntary details  In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name  The Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office	Date of birth Forename(s) Surname Address ††  Post town County/Region UK Postcode	MR
Please list the directors in a Voluntary details  In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name  The Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.	Date of birth Forename(s) Surname Address ††  Post town County/Region UK Postcode Country Nationality	Day Month Year  2
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Issue 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	100	£100		
		L			
	Totals	100	£100		
Traded public companies A traded public company means a company any of whose shares are shares admitted to trading on a regulated market	Please tick this box if your public company at any time this return				
List of past and present shareholders (use attached schedule where appropriate)	Please tick the appropriate	box below:	On paper In another format		
Private or non-traded public companies are required to provide a "full list" if one was not included with either of the last two returns.	A full list of shareholders for a private or non-traded public company is enclosed. Please complete Schedule A.				
Traded public companies are required to provide a list of shareholders who held at least 5% of the issued shares of any share class if a list was not	A list of shareholders holding shares of any share class frenclosed. Please complete	or a traded public compan	d y is		
provided with either of the last two returns.	A list containing sharehold	er changes is enclosed			
	→ For private or non-tr complete Schedule	raded public companies, pl	lease		
	→ For traded public co Schedule B	mpanies, please complet	ce .		
	There were no shareholde	er changes in this period			
Certificate	I certify that the information knowledge and belief	n given in this return is true			
Signed	J.R.+	ane	Date B July 2009		
* Please delete as appropriate  When you have signed the return, send it with the fee to the Registrar of Companies. Make cheques payable to Companies House.		continuation shee (enter number)	ts		
You do not have to give any contact		OT HOUSE, 20 ROPEMAK	ER STREET,		
information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the	LONDON EC2Y 9AR				
form. The contact information that you give will be visible to searchers of the	TEL: 020 7012 2430				
public record.		DX exchange			
			Page 4		

This must only be completed by private and public limited , companies that have not traded on a regulated market

## Schedule A for private or non-traded public companies List of past and present shareholders

	(Please use a continuation sheet if required)
Company number	2305333
Company name in full	BRM INSURANCE CONSULTANTS 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 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

## Do not give shareholder address information

	Shares or amount of stock transferred  Class and number of (if appropriate)						
Shareholder's name only	shares or	number of amount of k held	Class and r shares or amo transfe	number of ount of stock	Date of		
Name OBC Insurance Consultants Limited	Ordinary	100					
Name							
Name					<u> </u>		
Name							
Nomo							
Name		- <del></del> -					
Name							
Name							
	<u> </u>						
Name							
Name							
		<u>_</u>			<u></u>		