

BLUEPRINT

OneWorld

000448/75
363a

Please complete in typescript,
or in bold black capitals.

Annual Return

CHFP010

Company Number

2376164

Company Name in full

TSB GENERAL INSURANCE SERVICES LIMITED

Date of this return

The information in this return is made up
to

Day		Month		Year			
2	8	0	1	2	0	0	5

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.

CHARLTON PLACE

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

Post town

ANDOVER

County / Region

HAMPSHIRE

UK Postcode

SP10 1RE

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.

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 EdinburghA69
COMPANIES HOUSE0806
29/01/05

Register of members

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

25 GRESHAM STREET

Post town LONDON

County / Region

UK Postcode EC2V 7HN

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.

N/A

Post town

County / Region

UK Postcode

Company type

Public limited company

☐

Private company limited by shares

X

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).

Name

* Style / Title

MRS.

* Voluntary details.

Forename(s)

SHARON NOELLE

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

Address

Surname

SLATTERY

176 BLAGDON ROAD

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

Post town

NEW MALDEN

County / Region

SURREY

UK Postcode

KT3 4AL

Country

United Kingdom

BLUEPRINT

OneWorld

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	Mrs	
	Day	Month	Year
Date of birth	0	9	0 4 1 9 5 4
Forename(s)	JANET ANNE		
Surname	GREEN		
Address	STONECROFT HIGH STREET, CROPREDY		
Usual residential address			
Post town	BANBURY		
County / Region	OXFORDSHIRE	UK Postcode	OX17 1NG
Country	United Kingdom	Nationality	British
Business occupation	DIRECTOR		

* Voluntary details.

Name	* Style / Title	MR.	
	Day	Month	Year
Date of birth	1	2	0 9 1 9 6 4
Forename(s)	PHILIP DUNCAN		
Surname	LONEY		
Address	18 WALLISCOTE AVENUE, HENLEAZE		
Usual residential address			
Post town	BRISTOL		
County / Region		UK Postcode	BS9 4SA
Country	United Kingdom	Nationality	British
Business occupation	DIRECTOR		

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	2	£2.00
Totals	2	2.00

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



† a director / secretary

Date

28/11/25

† Please delete as appropriate.

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.

SHARON SLATTERY, 25 GRESHAM STREET, LONDON, EC2V 7HN

Tel

DX number DX exchange

BLUEPRINT

OneWorld

List of past and present shareholders Schedule to form 363a

CHFP010

Company Number 2376164

Company Name in full TSB GENERAL INSURANCE SERVICES 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	Class and number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Shares or amount of stock transferred (if appropriate) Date of registration of transfer
Name LLOYDS TSB GENERAL INSURANCE HOLDINGS LIMITED Address CHARLTON PLACE, ANDOVER, HAMPSHIRE UK postcode SP10 1RE	£1.00 Ordinary Shares Held 2		
Name Address UK postcode			
Name Address UK postcode			