



Please complete in typescript,
or in bold black capitals.

B
15
016933

363a

Annual Return

Company Number

2396184

Company Name in full

THE EXCELSIOR INSURANCE COMPANY LIMITED



* F363AD40 *

Date of this return (See note 1)

The information in this return is made up to

Day Month Year

16 06 1997

Date of next return (See note 2)

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

01 09 1997

Registered Office (See note 3)

Show here the address at the date of
this return.

166 HIGH HOLBORN

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

Post town

LONDON

County / Region

Postcode

WC1V 6TT

Principal business activities

(See note 4)

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.

GENERAL INSURANCE AND REINSURANCE BUSINESS

--



A21 *A4KAGX0L* 349
COMPANIES HOUSE 01/07/97

When you have completed and signed the form please send it to the
Registrar of Companies at:
Companies House, Crown Way, Cardiff, CF4 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

Register of members *(See note 5)*

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

Post town

County / Region

STORNOWAY HOUSE

13 CLEVELAND ROW, .

LONDON

Postcode

SW1A 1GG

Register of Debenture holders*(See note 6)*

If there is a register of debenture holders and it is not kept at the registered office, state here where it is kept.

Post town

County / Region

Postcode

Company type *(See note 7)*

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

X

Please mark the appropriate box

Company Secretary *(see notes 1-5)*

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

*Honours etc

Forename(s)

HELEN

Surname

TAUTZ

* Voluntary details.

Previous forename(s)

Previous surname(s)

Address

30 SOUTH CRESCENT

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

Post town

County / Region

Country

PRITTLEWELL

SOUTHEND-ON-SEA

ESSEX

Postcode

SS2 6TA

Directors (see notes 1 to 5)

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

Name	* Style / Title	MR	Day	Month	Year	
	* Honours etc		Date of birth	17	10	1937
	Forename(s)	RODNEY CHARLES				
	Surname	HALL				
	Previous forename(s)					
	Previous surname(s)					
Address	OAKINGTON, HUNGERFORD BOTTOM					
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	BURSLEDON					
	Post town	SOUTHAMPTON				
	County / Region		Postcode	SO31 8DP		
	Country		Nationality	BRITISH		
Business occupation	HEAD OF INSURANCE					
Other directorships	NO OTHER DIRECTORSHIPS					
* Voluntary details.						

Name	* Style / Title	MR	Day	Month	Year	
	* Honours etc		Date of birth	17	08	1949
	Forename(s)	GRAHAM JOSEPH				
	Surname	PARROTT				
	Previous forename(s)					
	Previous surname(s)					
Address	FLAT 1, 27 REDINGTON ROAD					
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	HAMPSTEAD					
	Post town	LONDON				
	County / Region		Postcode	NW3 7QY		
	Country	ENGLAND	Nationality	BRITISH		
Business occupation	COMPANY DIRECTOR					
Other directorships	See attached list					

Other relevant directorships

Company Number 2396184

Company Name THE EXCELSIOR INSURANCE COMPANY LIMITED

Directors Name PARROTT GRAHAM JOSEPH

† Directors only.

† Other directorships

AFI HOTELS LIMITED

ALLQUIET INVESTMENTS LIMITED

BRITISH SKY BROADCASTING GROUP PLC

BSB HOLDINGS LIMITED

GRANADA FOREX LIMITED

LAKEWOODS LIMITED

LEASED HOTELS LIMITED

PAVILION SERVICES GROUP LIMITED

PAVILION SERVICES LIMITED

PAVILION SERVICES TRUSTEES LIMITED

QUAGLINO'S PLC

SHIPLEY PARK LIMITED

SKY TELEVISION LIMITED

NOTES

Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential line.

Give previous forenames or surname(s) except:

- for a married woman, the name by which she was known before marriage need not be given.

- for names not used since the age of 18 or for at least 20 years

A peer or individual known by a title may state the title instead of or in addition to the forenames and surname and need not give the name by which that person was known before he or she adopted the title or preceded to it.

Other directorships.

Give the name of every company incorporated in Great Britain of which the person concerned is a director or has been a director at any time in the past five years.

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

- dormant

- a parent company which wholly owned the company making the return, or

- another wholly owned subsidiary of the same parent company.

Issued share capital (see note 9)
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)
£1 ORDINARY SHARE	3,500,000	£ 3,500,000.00
Totals	3,500,000	£ 3,500,000.00

List of past and present members
(Use attached schedule where appropriate)

A full list is required if one was not included with either of the last two returns.

(see note 10)

There were no changes in the period

☐

on paper in another format

A list of changes is enclosed

☐
☐

A full list of members is enclosed

☒
☐

Elective resolutions

(Private companies only)

(See note 11)

If at the date of this return an election is in force to dispense with annual general meetings, mark this box

☒

If at the date of this return an election is in force to dispense with laying accounts in general meetings, mark this box

☒

Certificate

I certify that the information given in this return is true to the best of my knowledge and belief.

Signed

H/Taunt 3

Date

† 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

continuation sheets.

(enter number)

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

THE SECRETARY, GRANADA GROUP PLC, STORNOWAY HOUSE, 13 CLEVELAND ROW, LONDON, SW1A	
1GG	
Tel 0171 451 3000	
DX number	DX exchange



Please complete in typescript,
or in bold black capitals.

List of past and present members Schedule to form 363a, 363b

Company Number

2396184

Company Name in full

THE EXCELSIOR INSURANCE COMPANY LIMITED

Number of shares
or amount of
stock held by
existing members
at date of this
return.

Particulars of shares or stock transferred since
the date of the last return (or in the case of the
first return, since the incorporation of the
company) by
(a) persons who are still members, and
(b) persons who have ceased to be members.

Name and address	Number or amount currently held	Number or amount Transferred	Date of registration of transfer	Remarks
FORTE LIMITED 166 HIGH HOLBORN, .., LONDON, WC1V 6TT	£1 ORDINARY SHARE 3,499,999			
FORTE NOMINEES LIMITED 166, HIGH HOLBORN, LONDON WC1V 6TT	£1 ORDINARY SHARE 1			