

102615

## 363a

Please complete in typescript, or in bold black capitals.

## **Annual Return**

Co	ompany Number	26318	37 		
Compa	any Name in full	TRUSTCARD LIMITED			
* F363AD40	*				
Data of this rat	<b>h</b>	Day	Month	Year	
Date of this ret	eturn is made up to	04	04	1998	
Date of next re If you wish to make yo to a date earlier than t of this return please sl Companies House will at the appropriate time	our next return the anniversary how the date here. I then send a form	Day 04	Month 04	Year 1999	
Registered Off Show here the addres this return.		71 LO	MBARD \$	STREET	
Any change of registered office <b>must</b> be notified on form 287.	Post town County / Region	LOND	ON		

## Principal business activities

Postcode

EC3P 3BS

(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.

7499		_
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Form revised March 1995

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

Companies House, Crown Way, Cardiff, CF4 3UZ for companies registered in England and Wales DX 33050 Cardiff

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.						
registered office, state field where it is kept.						
Post town						
County / Region		Postcode				
Register of Debenture holders						
(See note 6) If there is a register of debenture holders and it is not kept at the registered office,	N/A					
state here where it is kept.						
Post town						
County / Region		Postcode				
Company type (See note 7)						
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	Please mark the appropriate box					
Private company limited by guarantee exempt under section 30						
Private unlimited company with share capital						
Private unlimited company without share capital						
Company Socratory	Poteilo of a new common		ind on forms 2000			
Company Secretary <sub>(see notes 1-5)</sub>	Details of a new compar	y secretary must be notifi	led on form 200a.			
(Please photocopy this area to provide details of joint * Style / Title	MISS	*Honours etc				
secretaries). Forename(s)	KAREN KRISTINA					
Surname * Voluntary details.	PARKER					
Previous forename(s)	s)					
Previous surname(s)						
Address	SHAMMAH					
Usual residential	19 BEULAH ROAD					
address <sub>must</sub> be given. In the case of a Post town	HORNCHURCH	<del></del>				
corporation, give the registered or principal County / Region office address.	ESSEX	Postcode	RM12 4YR			
Country	,					

Please list directors in alphabetical order.		Details of new directors must be notified on form 288a							
	Name	* Style / Title	MISS			Day	Month	Year	
		* Honours etc		Date of	birth	03	12	1966	
		Forename(s)	SARAH	,,					
		Surname	BARFORD WILKS						
	Pre	vious forename(s)							
	Pre	evious surname(s)							
	Address	s	3 TOWER ROAD, STRAW	BERRY HILL					
Usual resider							<u>.</u>		
address must given. In the car corporation, giv	se of a	Post town	TWICKENHAM				· · · · ·		
registered or pri office address.	incipal	County / Region	MIDDLESEX	Po	stcode	TW1 4PD			
		Country		Nati	ionality	BRITIS	===== SH		
	Busines	ss occupation	COMPANY SECRETARY						
	Other d	irectorships	NO OTHER DIRECTORSHIPS						
* Voluntary details.				-,_	· · · · · · · · · · · · · · · · · · ·	···			
	Name	* Style / Title	MR.			Day	Month	Year	
		* Honours etc		Date of	birth	02	02	1959	
		Forename(s)	MICHAEL ROGER						
		Surname	HATCHER						
	Pre	vious forename(s)							
	Pre	evious surname(s)							
	Addres	s	HUNYANI, ARDLEIGH ROAD						
Usual resider address must			LITTLE BROMLEY						
given. In the ca corporation, giv	se of a e the	Post town	MANNINGTREE						
registered or pr office address.	incipai	County / Region	ESSEX	Po	ostcode	CO11	2QA		
		Country		Nat	ionality	BRITIS	======================================		
	Busine	ss occupation	COMPANY SECRETARY						
	Other d	lirectorships	NO OTHER DIRECTOR	RSHIPS					

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	21	03	1948		
		Foreneme(s)	ALASTAIR JOHN		· · · · · · · · · · · · · · · · · · ·					
		Surname	MICHIE							
	Previous forename(s) Previous surname Address				<del>- ¥</del>					
			14 MARLYNS CLOSE, BU	RPHAM	701	~1				
Usual reside	ntial									
address must given. In the ca	be se of a	Post town	GUILDFORD		710					
corporation, giv registered or pr	e the	County / Region	SURREY		Postcode	GU4 7	LR			
office address.		Country								
	Nationa	ality	BRITISH							
	Busine	ss occupation	COMPANY SECRETARY							
	Other d	lirectorships	NO OTHER DIRECTORSHIPS							
·										
	Nama	* Style / Title	MRS.		- 12 - 13 - 14 - 14 - 14 - 14 - 14 - 14 - 14		·			
	Name	* Style / Title	MRS.		Data as hinta	Day	Month			
	Name	* Honours etc			Date of birth	Day 22	Month 02	Year 1964		
	Name	* Honours etc Forename(s)	HELEN SUZANNE		Date of birth		1			
	Name	* Honours etc			Date of birth		1			
1		* Honours etc Forename(s)	HELEN SUZANNE		Date of birth		1			
į	Pre	* Honours etc Forename(s) Surname	HELEN SUZANNE RODGERS		Date of birth		1			
1	Pre	* Honours etc Forename(s) Surname evious forename(s) Previous surname	HELEN SUZANNE RODGERS HELEN SUZANNE				1			
Usual reside	Pre Addres	* Honours etc Forename(s) Surname evious forename(s) Previous surname	HELEN SUZANNE RODGERS HELEN SUZANNE PORTSMOUTH				1			
address must given. In the ca	Pre Addres ntial be use of a	* Honours etc Forename(s) Surname evious forename(s) Previous surname	HELEN SUZANNE RODGERS HELEN SUZANNE PORTSMOUTH				1			
address must given. In the ca corporation, giv registered or pr	Addres  ntial be use of a we the	* Honours etc Forename(s) Surname evious forename(s) Previous surname	HELEN SUZANNE RODGERS HELEN SUZANNE PORTSMOUTH HEATHER BANK, 6 BURS				02			
address must given. In the ca corporation, giv	Addres  ntial be use of a we the	* Honours etc Forename(s) Surname evious forename(s) Previous surname s Post town	HELEN SUZANNE RODGERS HELEN SUZANNE PORTSMOUTH HEATHER BANK, 6 BURS			22	02			
address must given. In the ca corporation, giv registered or pr	Addres  ntial be use of a we the	* Honours etc Forename(s) Surname evious forename(s) Previous surname s Post town County / Region Country	HELEN SUZANNE RODGERS HELEN SUZANNE PORTSMOUTH HEATHER BANK, 6 BURS			22	02			
address must given. In the ca corporation, giv registered or pr	Addres  ntial be use of a ve the rincipal	* Honours etc Forename(s) Surname evious forename(s) Previous surname s Post town County / Region Country	HELEN SUZANNE RODGERS HELEN SUZANNE PORTSMOUTH HEATHER BANK, 6 BURS EAST GRINSTEAD			22	02			
address must given. In the ca corporation, giv registered or pr	Addres  ntial be ise of a ve the incipal  Nationa	* Honours etc Forename(s) Surname evious forename(s) Previous surname s Post town County / Region Country	HELEN SUZANNE RODGERS HELEN SUZANNE PORTSMOUTH HEATHER BANK, 6 BURS EAST GRINSTEAD BRITISH	STON GARDENS		22	02			

Issued share capital (see note 9) Enter details of all the shares in issue at the date of this return.	(e.g. Ordinary/Preference)	Number of shares issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share)
	ORD SHS £1	2	£ 2
	Totals	2	£ 2.00
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	There were no changes	s in the period	
returns.		on pape	r in another format
(see note 10)	A list of changes is enc		
	A full list of members is	enclosed X	
Elective resolutions (Private companies only) (See note 11)	If at the date of this retu	ırn an election is in force annual general meeting	
	If at the date of this retu laying acc	urn an election is in force ounts in general meeting	to dispense with IS, mark this box
Certificate	I certify that the information knowledge and belief.	ation given in this return i	s true to the best of my
Signed	N. Lo	Date	14.4.98
† 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 <b>Companies House.</b>	This return include	(enter number)	ontinuation sheets.
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.	MISS K.K. PARKER, 71 LOMBAR	D STREET, LONDON, EC3P 3BS	
someon and to drive quoty.		Tel 0171 356 1173	
	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	2631837	
Company Name in full	TRUSTCARD LIMITED	
Name and address	Number of shares Particulars of shares or stock transferred si or amount of the date of the last return (or in the case of stock held by first return, since the incorporation of the existing members company) by at date of this (a) persons who are still members, and return. (b) persons who have ceased to be members amount amount registration currently held Transferred of transfer Remarks	the
CTSB NOMINEES LIMITED 71 LOMBARD STREET, LONDON, EC3P 3BS	Ord shs £1 0 1 25/07/1997 TSB BANK PLC	
TSB BANK PLC 71 LOMBARD STREET, LONDON, EC3P 3BS	Ord shs £1	