

Please complete in typescript,  
or in bold black capitals.

**Annual Return**

CHFP010

**Company Number**

3196171

**Company Name in full**

Clerical Medical Investment Group Limited

**Date of this return**

The information in this return is made up  
to

Day		Month		Year		
0	2	0	5	2	0	3

**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.

33 Old Broad Street

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

Post town

County / Region

London

UK Postcode

EC2N 1HZ

**Principal business activities**

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

6601

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

A11  
COMPANIES HOUSE0891  
07/06/03

COMPANIES HOUSE

17/05/03

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 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**

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

\* Voluntary details.

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

**Name**

\* Style / Title

Mr

Forename(s)

Peter John

Surname

Veale

**Address**

17 Sullivan Road

Post town

Kennington

County / Region

London

UK Postcode

SE11 4UH

Country

United Kingdom

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

**Directors**

Please list directors in alphabetical order.

**Details of new directors must be notified on form 288a**

Name \* Style / Title \_\_\_\_\_

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

Day Month Year  
Date of birth 0 5 0 3 1 9 6 4

Forename(s) | Keith William \_\_\_\_\_

Surname | Abercromby \_\_\_\_\_

Address | The Grange, Wood View, Cullingworth \_\_\_\_\_

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

Post town | Bradford \_\_\_\_\_

County / Region | West Yorkshire \_\_\_\_\_ UK Postcode | BD13 5AJ \_\_\_\_\_

Country | \_\_\_\_\_ Nationality | British \_\_\_\_\_

Business occupation | General Manager \_\_\_\_\_

\* Voluntary details.

Name \* Style / Title \_\_\_\_\_

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

Day Month Year  
Date of birth 2 3 0 4 1 9 4 2

Forename(s) | David Spencer \_\_\_\_\_

Surname | Boyle \_\_\_\_\_

Address | The Dower House, Heythrop \_\_\_\_\_

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

Post town | Chipping Norton \_\_\_\_\_

County / Region | Oxfordshire \_\_\_\_\_ UK Postcode | OX7 5TL \_\_\_\_\_

Country | \_\_\_\_\_ Nationality | British \_\_\_\_\_

Business occupation | Company Director \_\_\_\_\_

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

Name \* Style / Title \_\_\_\_\_

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

Day Month Year  
Date of birth 0 2 1 0 1 9 5 4

Forename(s) | Douglas

Surname | Ferrans

Address | 9 Lochbroom Drive, Newton Mearns

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

Post town | Glasgow

County / Region | Lanarkshire UK Postcode | G77 5DY

Country | Scotland Nationality | British

Business occupation | Chief Executive, Asset Management

\* Voluntary details.

Name \* Style / Title | Mr

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

Day Month Year  
Date of birth 2 6 0 4 1 9 5 8

Forename(s) | Philip Andrew

Surname | Hodgkinson

Address | Lynden Manor, Langworthy Lane

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

Post town | Holyport

County / Region | Berkshire UK Postcode | SL6 2HH

Country | 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.

<b>Name</b>	<b>* Style / Title</b>	Mr.	
		Day	Month
		Year	
<b>Date of birth</b>		1	0
		0	4
		1	9
		4	9
<b>Forename(s)</b>	Brian Gammell		
<b>Surname</b>	Ivory		
<b>Address</b>	12 Ann Street		
<b>Post town</b>	Edinburgh		
<b>County / Region</b>		<b>UK Postcode</b>	EH4 1PJ
<b>Country</b>		<b>Nationality</b>	British
<b>Business occupation</b>	Company Director		

\* Voluntary details.

<b>Name</b>	<b>* Style / Title</b>	Mr	
		Day	Month
		Year	
<b>Date of birth</b>		1	0
		0	6
		1	9
		5	5
<b>Forename(s)</b>	John Stephen		
<b>Surname</b>	Edwards		
<b>Address</b>	Ebbor House, Wookey Hole, Nr Wells		
<b>Post town</b>			
<b>County / Region</b>	Somerset	<b>UK Postcode</b>	BA5 1AY
<b>Country</b>	United Kingdom	<b>Nationality</b>	British
<b>Business occupation</b>	Chief Executive, Life & Pension		

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

\* Style / Title

Mr.

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

Day Month Year

Date of birth

1 9 0 1 1 9 4 4

Forename(s)

John Neil

Surname

Maclean

**Address**

47 Sherbrooke Avenue, Pollokshields

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

Post town

Glasgow

County / Region

UK Postcode G41 4SE

Country

Nationality British

**Business occupation**

Company Director

\* Voluntary details.

**Name**

\* Style / Title

Mr

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

Day Month Year

Date of birth

1 5 0 3 1 9 3 6

Forename(s)

Michael Rodney Newton

Surname

Moore

**Address**

32 Lower Belgrave Street

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

Post town

London

County / Region

UK Postcode SW1W 0LN

Country

United Kingdom

Nationality British

**Business occupation**

Director

**Directors***Please list directors in alphabetical order.***Details of new directors must be notified on form 288a****Name****\* Style / Title**

Mr

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

Day Month Year

Date of birth

2 7 1 0 1 9 4 1

Forename(s)

Peter Louis Michael

Surname

Sherwood

**Address**

10 College Road, Clifton

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

Post town

Bristol

County / Region

UK Postcode

BS8 3HZ

Country

United Kingdom

Nationality

British

**Business occupation**

Director

\* Voluntary details.

**Name****\* Style / Title**

Mr

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

Day Month Year

Date of birth

1 5 1 1 1 9 5 6

Forename(s)

Howard Michael

Surname

Posner

**Address**

Eaves House, Stocks Lane, Luddenden

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

Post town

HALIFAX

County / Region

West Yorkshire

UK Postcode

HX2 6PR

Country

Nationality

British

**Business occupation**

General Manager

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

\* Style / Title

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

Day Month Year

Date of birth

3 0 1 0 1 9 5 8

Forename(s)

Paul Russell

Surname

Moore

**Address**

Beacon Banks

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

Post town

Husthwaite

County / Region

York

UK Postcode

YO61 4PB

Country

Nationality

British

**Business occupation**

Head of Risk, IID

\* Voluntary details.

**Name**

\* Style / Title

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

Day Month Year

Date of birth

Forename(s)

Surname

**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 Shares of £1.00	1,629,000,000	£1,629,000,000.00
<b>Totals</b>	1,629,000,000	1,629,000,000.00

**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

12/5/2003

† 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.

Mr P J Veale, Company Secretary, 33 Old Broad Street,

London, EC2N 1HZ

Tel: 020 7321 1146

Fax: 020 7321 1425

DX number 42626

DX exchange CHEAPSIDE

## List of past and present shareholders Schedule to form 363a

CHFP010      **Company Number**    3196171

**Company Name in full**    Clerical Medical Investment 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	Class and number of shares or amount of stock held	Shares or amount of stock transferred (if appropriate)	
		Class and number of shares or amount of stock transferred	Date of registration of transfer
<b>Name</b> HBOS Financial Services Limited <hr/> <b>Address</b> 33 Old Broad Street, London, United Kingdom <hr/> <b>UK postcode</b> EC2N 1HZ	£1.00 Ordinary Shares of £1.00           Shares Held 1,629,000,000		
<b>Name</b> <hr/> <b>Address</b> <hr/> <b>UK postcode</b>			
<b>Name</b> <hr/> <b>Address</b> <hr/> <b>UK postcode</b>			