

181957/15

3632

		O O O O O			
Please complete in typescript, or in bold black capitals. CHFP001 Company Number		Annual Return			
•	Ompany Number				
Comp	oany Name in full	Country Mutual Insurance Brokers Limited			
Date of this return The information in this return	is made up to	Day Month Year [0 [5 / [1 [0 / [2 [0 [0 [2 [0 [0 [2 [0 [0 [0 [0 [0 [0 [0 [0 [0 [0 [0 [0 [0			
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. Registered Office Show here the address at the date of this return.		Day Month Year L / L / L L L Tiddington Road, Stratford upon Avon			
Any change of registered office	Post town				
must be notified on form 287.	County / Region				
on totti 201.	UK Postcode	C V 3 7 7 B J			
Principal business	activities				
Show trade classification code number(s) for the principal activity or activities.		6603			
	t be determined,				



A50 COMPANIES HOUSE

0144 09/10/02

Form revised September 1999

Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ
for companies registered in England and Wales DX 33050 Cardiff

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh for companies registered in Scotland Page 1

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	LUK 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 here where it is kept. 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	Please tick 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 Secretary (Please photocopy this area to provide details of joint sec- * Style / Title	Details of a new company secretary must be notified on form 288a. $\underline{\mathbf{Mr}}$
retaries). Forename(s)	James Damian
* Voluntary details. If a partnership give Surname	Creechan
the names and addresses of the partners or the name of the partnership and office address. Address	Lifford House, Luddington Road LL.B LL.M. Solicitor
Usual residential Post town	Stratford-upon-Avon
given. In the case of a corporation or a County / Region	Warwickshire UK Postcode C V 3 7 9 S E
Scottish firm, give the registered or principal office address. Country	
CHAD 21/12/99 36/12.79.3	Page 2

Directors Please list directors in alpha	abetical order.	Details of new directors must be notified on form 288a
Name	* Style / Title	Mr
Directors In the case of a director that	Date of birth	Day Month Year 10 1 11 12 11 9 6 0
is a corporation or a Scottish firm, the name is the corporate or firm name.	Forename(s) Surname	Kim Arif BSc Hons FIA
Addr		5 Hathaway Lane
Usual residential address must be Post town		Stratford-upon-Avon
given. In the case of a corporation or a Scottish firm, give the registered or principal	County / Region	
office address.	Country	Nationality British
Busi	ness occupation	Deputy General Manager
* Voluntary details.		
Name	* Style / Title	Mr
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	Day Month Year
		3 0 0 4 1 9 5 0 Sidney Philip
	Surname	Gibson FCII
Address		Ashfield, Kineton Road, Pillerton Priors
Usual residential address must be given. In the case of a		
corporation or a Scottish firm, give the	Post town	Warwick
registered or principal office address.	County / Region	UK Postcode C V 3 5 0 P H
	Country	Nationality British
Rusii	nece accumation	Insurance Underwriting Manager

Directors Please list directors in alphabetical order.		Details of new directors must be notified on form 288a
Name * Style / Title		Mr
Directors In the		Day Month Year
case of a director that is a corporation or a		1 4 10 8 11 9 5 14
Scottish firm, the name is the corporate or firm name.	Forename(s)	Neil
rate of minimane.	Surname	McKenzie FCII
Address		27 Chapel Close
Usual residential		
address must be given. In the case of a corporation or a	Post town	Welford on Avon
Scottish firm, give the registered or principal office address.	County / Region	Warwickshire UK Postcode C V 3 7 8 Q J
onice address.	Country	Nationality British
Busii	ness occupation	Assistant General Manager
* Voluntary details.		
Name	* Style / Title	Mr
Physical and the state of the s		Day Month Year
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	10 11 10 3 11 9 5 0
	Forename(s)	Robert
	Surname	Newton BSc FIA
Address		Mole Bank House, Haydons Close
Usual residential address must be		
given. In the case of a corporation or a Scottish firm, give the	Post town	Chipping Campden
registered or principal office address.	County / Region	Gloucestershire UK Postcode G L 5 5 6 J N
	Country	Nationality British
Busir	ness occupation	General Manager

Directors Please list directors in alphabetical order.		Details of new directors must be notified on form 288a
Nam		Mr
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	Day Month Year [2 [7] [1 [2] [4 [7]
	Forename(s)	Anthony James
Tate of Illimitatio.	Surname	White
Addr	ess	Manor Cottage
Usual residential address must be		34 Shottery
given. In the case of a corporation or a	Post town	Stratford on Avon
Scottish firm, give the registered or principal office address.	County / Region	Warwickshire UK Postcode C V 3 7 9 H A
	Country	Nationality British
Busi	ness occupation	Assistant General Manager
* Voluntary details.		
Name	e * Style / Title	L
Directors In the		Day Month Year
case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	<u></u>
	Forename(s)	
	Surname	
Addi Usual residential address must be	ress	
given. In the case of a corporation or a Scottish firm, give the	Post town	
registered or principal office address.	County / Region	UK Postcode LLLLL
	Country	Nationality
Business occupation		1

.

Company Number 3643783

List of past and present shareholders Schedule to form 363a

Company Name in full	Country Mutual Insurance Brokers 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 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	(if a _l	
Name N.F.U. Mutual Management Company Limited	£1 ORD 20000000	Stock transferred	
Address Tiddington Road Stratford upon Ayon			
Warwickshire UK Postcode © V 3 7 7 B J			
Name L			
Address LL			
LUK Postcode			
Name L			
Address L			
UK Postcode			

Issued share capitalEnter 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		0000000 F	£20000000
		Ĺ		
			L	
	Totals	20	000 <u>00</u> 00	£20000000
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	There were no changes	in the period		
returns.	A list of changes is enclo	Г	paper	in another format
	A full list of shareholders	s is enclosed	X	
Certificate	I certify that the informat knowledge and belief.	ion given in this	return is t	true to the best of my
Signed	en au	~	Date	7/10/02
† Please delete as appropriate	TXAXINACIXir / secretary			
When you have signed the return send if with the fee to the Registrar of Companies Cheques should be made payable to Companies House.	i nis return include	es 0 (enter numbe		nuation sheets.
Please give the name, address, telephone number, and if available,	Secretarial Department, I	NFU Mutual		
a DX number and Exchange, for the person Companies House should	Tiddington Road, Stratford Upon Avon			
contact if there is any query.	Warwickshire CV37 7BJ	Tel		
	DX number	DX exchang	ge	