

111851 /210

363a

Please complete in typescript, or in bold black capitals		Annual Return	
CHFP010 Con	npany Number	3937800	
Company Name in full		Railway Safety	
Date of this return The information in this return is made up to		Day Month Year 2 5 0 2 2 0 0 8	
Date of next return	1		
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.		40 Melton Street	1-11-0
Any change of registered office must be notified on form 287	Post town County / Region UK Postcode	London NW1 2EE	
Principal business	s activities		
Show trade classification code number(s) for the principal activity or activities		6010	
If the code number can give a brief description			



activity

123

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

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				
Rept town				
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	<u> </u>			
office, state where it is kept Post town	1			
County / Region				
	UN POSICODE			
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	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				
* Voluntary details	Lindsay			
If a partnership give Surname the names and addresses of the	Crawford			
partners or the name Address of the partnership and office address	80 Salvington Hill, High Salvington			
Usual residential address must be Post town	Worthing			
given In the case of a corporation, County / Region give the registered	West Sussex UK Postcode BN13 3BD			
or principal office Country address				
BLUEPRINT				

			company no osovoo
Directors Please list directors in alphabetical order		Details of new directors must be	notified on form 288a
N	lame * Style / Title	Mr	
_		Day Month Year	
Directors In the case of a director that is a corporate or a Scottish firm, the name is the corporate or firm name	Date of birth	2 8 0 8 1 9 7 0	
	Forename(s)	Peter Edward	
	Surname	Duff	
Δ.	Address	18 Croydon Road	
Usual residential address must be			
given In the case of a corporation,	Post town	Reigate	
give the registered or principal office	County / Region	Surrey	UK Postcode RH2 0PG
address	Country		Nationality British
Business occupation		Director	
* Voluntary details			
N	lame * 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	Date of billing	Day Month Year 2 4 0 6 1 9 6 5	
	Forename(s)	Ian Christopher	
	Surname	Thompson	
Address		27 Greenwood Close	· · · · · · · · · · · · · · · · · · ·
Usual residential address must be given In the case of a corporation, give the registered or principal office address		I	
	Post town	Thames Ditton	
		Surrey	UK Postcode KT7 OBG
	Country		Nationality British
	Business occupation	Insurance Manager	

Issued share capital					
Enter details of all the shares in issue at the date of this return	Class (e g Ordinary/Preference)	Number of sha issued	•	Aggregate Nominal Value (re Number of shares issued multiplied by nominal value per share, or total amount of stock)	
1		1		,	
	, 		l	_	
			l		
			l		
		L	[
	Totals		(
List of past and present shareh	nolders				
(use attached schedule where appropriate)	There were no change	es in the period			
A full list is required if one was not included with either of the last two		(on paper	ın another format	
returns	A list of changes is en	closed			
	A full list of sharehold	ers is enclosed			
Certificate	I certify that the inforn knowledge and belief	nation given in this i	return is t	rue to the best of my	
0:			5.4.		
Sign	ed		Date	20/3/08	
† Please delete as appropriate	† a director / secretary	_			
When you have signed the return send with the fee to the Registrar of	it This return in	cludes 0	co	ntinuation sheets	
Companies		(enter number)			
Cheques should be made payable to Companies House.		•	·		
Please give the name, address, telepho	ne Lindsay Crawfor	d, Assistant Se	cretar	y, Network Raıl	
number and, if available, a DX number and Exchange of the person Companies		ton street For	ndon M		
House should contact if there is any que					
		Tel [
BLUEPRINT	DX number l	DX eychan	ne I		