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Return And Declaration Delivered For Registration By A Part XXIII Company

This form should be completed in black.

Company name	CLERICAL MEDICAL INVESTMENT
	GROUP LIMITED
Country of incorporation	ENGLAND 9 WALES
	-
Address of place of buisness in Northern Ireland	4TH FLOOR, AVENUE HOUSE
	42-44 ROSEMARY STREET
	Post town BELFAST
	County/Region NORTHERN IRELAND
,	Postcode BTI 1QE
	rosicode 1211 1412
1	
Consitution of the company (A certified English translation must be included)	A certified copy of the: (mark the appropriate box)
mast be managery	Charter
REGISTERED	Memorandum and Articles of Association
The same of the sa	Statutes
	Other instrument
	constituting or defining the constitution of the company is/are delivered for registration.
L	

Directors Please list directors in alphabetical order.	
Name *Style/Title	CD MR
Forename	00.01.00
Surnam	000-11-
*Honours et	CBE
Previous forename	
Previous surnam	
Address	AD CHESTNUTS, FRYERNING LANE
Usual residential address must be giver	
In the case of a corporation, give th registered or principal office address.	Post town INGATESTONE
	County/Region <u>ESSEX</u>
	Postcode CM4 OGF Country ENGLAND
Date of birth	DO 14 08 35 Nationality NA BRITISH
Business occupation (if any	ОС
If none other directorship	OD CLERICAL MEDICAL AND GENERAL LIFE ASS. SCIETY
	CLERICAL MEDICAL INVESTMENT GROUP (HOLDINGS)
Name *Style/Title	CD MR
Name *Style/Title Forenames	DAVID SPENCER
Forenames	DAVID SPENCER BOYLE
Forenames	DAVID SPENCER BOYLE
Forenames	DAVID SPENCER BOYLE
Forenames Surname *Honours etc	DAVID SPENCER BOYLE
Forenames Surname *Honours etc Previous forenames	DAVID SPENCER BOYLE
Forenames Surname *Honours etc Previous forenames Previous surname Address Usual residential address must be given.	DAVID SPENCER BOYLE
Forenames Surname *Honours etc Previous forenames Previous surname Address	DAVID SPENCER BOYLE AD THE DOWER HOUSE
Forenames Surname *Honours etc Previous forenames Previous surname Address Usual residential address must be given. In the case of a corporation, give the	DAVID SPENCER BOYLE AD THE DOWER HOUSE HEYTHROP
Forenames Surname *Honours etc Previous forenames Previous surname Address Usual residential address must be given. In the case of a corporation, give the	DAVID SPENCER BOYLE AD THE DOWER HOUSE ITEYTHROP Post town CHIPPING NORTON County/Region OXFORDSHIRE Postcode QX7 5TL Country ENELAND
Forenames Surname *Honours etc Previous forenames Previous surname Address Usual residential address must be given. In the case of a corporation, give the	DAVID SPENCER BOYLE AD THE DOWER HOUSE ITEYTHROP Post town CHIPPING NORTON County/Region OXFORDSHIRE Postcode QX7 5TL Country ENGLAND Nationality NA BRITISH
Forenames Surname *Honours etc Previous forenames Previous surname Address Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	DAVID SPENCER BOYLE AD THE DOWER HOUSE ITEYTHROP Post town CHIPPING NORTON County/Region OXFORDSHIRE Postcode OXT 5TL Country ENELAND DO 23 04 42 Nationality NA BRITISH OC MANAGING DIRECTOR, BUPA
Forenames Surname *Honours etc Previous forenames Previous surname Address Usual residential address must be given. In the case of a corporation, give the registered or principal office address. Date of birth	DAVID SPENCER BOYLE AD THE DOWER HOUSE ITEYTHROP Post town CHIPPING NORTON County/Region OXFORDSHIRE Postcode OX7 STL Country ENELAND NA BRITISH
Forenames Surname *Honours etc. Previous forenames Previous surname Address Usual residential address must be given. In the case of a corporation, give the registered or principal office address. Date of birth Business occupation (if any)	DAVID SPENCER BOYLE AD THE DOWER HOUSE ITEYTHROP Post town CHIPPING NORTON County/Region OXFORDSHIRE Postcode OXT 5TL Country ENELAND DO 23 04 42 Nationality NA BRITISH OC MANAGING DIRECTOR, BUPA

Directors	i lirectors in alphabetical order.	
Name	*Style/Title	CD MRS
	Forenames	GILLIAN ELIZABETH
	Surname	CAMM
	*Honours etc	
	Previous forenames	·
	Previous surname	
Address		AD OAKLEAZE
Usual reside	ential address must be given.	BREADSTONE
	of a corporation, give the principal office address.	Post town BERKELEY
		County/Region GLOUCESTERSHIRE
		Postcode GLI3 9HE Country ENGLAND
	Date of birth	DO 31 12 59 Nationality NA BRITISH
E	Business occupation (if any)	OC BUSINESS TRANSFORMATION DIRECTOR
	If none other directorships	OD
		·
		CD one
Name	*Style/Title	
	Forenames	JAMES ROBERT
	Surname	CROSBY
•	*Honours etc	
	Previous forenames	
	Previous surname	
^ -l-l		18111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Address

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

Date of birth

Business occupation (if any)

If none other directorships

*Voluntary details

on WK
JAMES ROBERT .
CROSBY
AD PALESIDE
59 BENRHYDDING ROAD
Post town LKLEY
County/Region WEST YORKSHIRE
Postcode LS29 8RN Country ENGLAND
DO 14 03 56 Nationality NA BRITISH
OC CHIEF EXECUTIVE, HALIFAX PLC
OD
j

Directors Please list directors in alphabetical order.	
Name *Style/Title	CD MR
Forenames	JOHN STEPHEN
Surname	1200025
*Honours etc	
Previous forenames	
Previous surname	AD EBBOR HOUSE, WOOKEY HOLE.
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post town
Date of birth Business occupation (if any)	
If none other directorships	OD
Name *Style/Title	co me
Forenames	MICHAEL RODNEY NEWTON
Surname	MOORE
*Honours etc	CBE
Previous forenames	
Previous surname	
Address	AD 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
Date of birth	Postcode SWIW OLD Country ENGLAND DO 15 03 36 Nationality NA BRITISH
Business occupation (if any)	OC DIRECTOR
If none other directorships	OD CLERICAL, MEDICAL AND GENERAL LIFE ASS. SOCIET "
*Voluntary details	CLERICAL MEDICAL INVESTMENT GROUP (HOLDINGS) LTD;
•	LINIX PRINTING TECHNOLOGIES PLC; QUICKS FROUP PLC; WHICH? LIMITED; PUBLIC CONCERN AT WORK; BRIXTON ESTATES PLC; FLORIBUNDA (BELGRAVIA) LTD; STATUS HOLDINGS PLC; ALTERNATIVE INVESTMENT

COMPANY LIMITED.

Company Secreta	ary(ies)	
Name	*Style/Title	cs mr
4	Forenames	PETER JOHN
	Surname	VEALE
	*Honours etc	
P	revious forenames	
*	Previous surname	
Address		AD 14 TURNER CLOSE
Usual residential addi In the case of a cor registered or principa	rporation, give the	CAMBERWELL Post town LONDON County/Region Postcode SW9 6UQ Country ENGLAND
Name	*Style/Title	CS
	Forenames	
	Surname	
	*Honours etc	
Pr	revious forenames	
Ī	Previous surname	
Address		AD
Usual residential address In the case of a corp registered or principal	poration, give the	Post town
	· !	County/Region
		Postcode Country
Person(s) author	rised	
List of some one or more persons resi-	*Style/Title	
dent in Northern Ireland authorised	Forenames	
to accept on the company's behalf	Surname	
service of process and any notice re- quired to be served on it.	Address	
		Post town
*Voluntary details		County Postcode

Person(s) authorised (continued)

	(
List of some one or	*Style/Title	MR
more persons resident in Northern	Forenames	PAUL M DESCRIBE
Ireland authorised to accept on the	Surname	MCBRIDE
company's behalf service of process	Address	L'ESTRANGE & BRETT, SOLICITORS
and any notice required to be served		ARNOTT HOUSE, 12-16 BRUGE STREET
on it.		Post town BELFAST
		County Postcode 811 ILS
	i	
	*Style/Title	
	Forenames	
	Surname	
	Address	
		Post town
		County Postcode
	. [
	*Style/Title	
	Forenames	•
	Surname	
	Address	
		Danktown
		Post town
	north control of the	County Postcode
	*Style/Title	
	Forenames	
	Surname	
	Address	
		Post town

County

Postcode

*Voluntary details

Declaration	
Full name and address	1 PETER JOHN VEALE
t t	of (address) 14 TURNER CLOSE, CAMBERWELL
	LONDON, SW9 600
*delete as applicable	a *director/*secretary/*person authorised to accept on the company's behalf service of process or any other notices required to be served on it, do solemnly and sincerely declare that the company established its place of business in Northern Ireland on し ストルレトペソ レラマフ
	anter date
	and I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the Statutory Declarations Act 1835
	Signed
	Declared at
	the 26 day of March Zool
	one thousand nine Dupdred and
	before me DAVA TORDAN
	A Commissioner for Oaths or Notary Public or Justice of the Peace or Solicitor having the powers conferred on a Commissioner for Oaths.
,	
Number of continuation sheets attached	3
<u>.</u>	

To whom should Companies Registry direct any enquiries about the information on this form?

JULIAN MYERS		
CLERICAL MEDICAL INVESTMENT		
GROUP LIMITED		
15 ST JAMES'S SQUARE		
LONDON Postcode SWIY 4LP		
Telephone 020 7321 1146 Extension		

Please ensure the form is fully completed and then send it to the Register of Companies at:

IDB House

64 Chichester Street, Belfast BT1 4JX.

Notes

- 1 The Copy of the instrument constituting or defining the constitution of the company must be certified in the place of incorporation of the company to be a true copy:-
 - (a) by an official of the Government to whose custody the original is committed; or
 - (b) by a notary public; or
 - (c) by an officer of the company on oath taken before:
 - a person having authority in that place to administer an oath; or
 - (ii) any of the British officials mentioned in section 6 of the Commissioners for Oaths Act 1889.
- 2 The translation of the instrument must be certified to be a correct translation:-
 - (a) if the translation was made in the United Kingdom, by
 - (i) a notary public in any part of the United Kingdom;
 - (ii) a solicitor (if the translation was made in Scotland), a solicitor of the Supreme Court of Judicature of England and Wales (if it was made in England or Wales), or a solicitor of the Supreme Court of Judicature of Northern Ireland (if it was made in Northern Ireland); or
 - (iii) a person certified by a person mentioned above to be known to him to be competent to translate the document into English; or

- (b) if the translation was made outside the United Kingdom, by
 - (i) a notary public;
 - (ii) a person authorised in the place where the translation was made to administer an oath;
 - (iii) any of the British officials mentioned in section 6 of the Commissioners for Oaths Act 1889:
 - (iv) a person certified by a person mentioned above to be known to him to be competent to translate the document into English.
- 'Director' includes any person who occupies the position of a director, by whatever name called.
- 4 For an individual, his present Christian name(s) and surname must be given, together with any previous Christian name(s) or surname(s)

'Christian name' includes a forename. In the case of a peer or person usually known by a title different from his surname, 'surname' means that title. In the case of a corporation, its corporate name must be given.

A previous Christian name or surname need not be given if:-

- (a) in the case of a married woman, it was a name by which she was known before her marriage; or
- (b) it was changed or ceased to be used at least 20 years ago, or before the person who previously used it reached the age or 18; or

- (c) in the case of a peer a person usually known by a British title different from his surname, it was a name by which he was known before he adopted the title or succeeded to it.
- 5 Usual residential address must be given or, in the case of a corporation, the registered or principal office.
- 6 In the case of an individual who has a business occupation, this occupation should be named. In the case of an individual who has no business occupation but who holds one or more other directorships, particulars should be given of other directorships.
- 7 Directors' dates of birth must be given.
- 8 If the form provides insufficient space the names and particulars can be entered on photocopies of the appropriate pages.
- 9 If made in a foreign country the declaration may be made before any British official mentioned in section 6 of the Commissioners for Oaths Act 1889, or before any person having authority to administer an oath in that country.