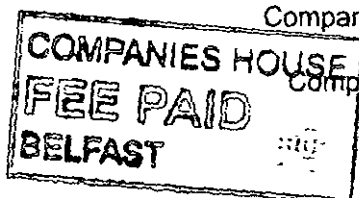


CRFA 0004

This form should be completed in black.

371 (a)

Annual Return



Company Number

Company Name

CN NI 21247

Ulster Bank Insurance Services Limited

Date of this return

The information in this return is made up to

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 Registry will then send a form at the appropriate time

	Day	Month	Year
DA	30	09	2009

Show Date

DB	30	09	2010
----	----	----	------

Registered Office

Show here the address at the date of this return

Any change of registered office must be notified on form 295

RO 11-16 Donegall Square East

Post town Belfast

County/Region Co Antrim

Postcode BT1 5UB

Principal business activities

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

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

PA 8 6 0 0

COMPANIES HOUSE

01 DEC 2009

BELFAST

COMPANIES HOUSE

28 OCT 2009

BELFAST



JZPYAFF9

JNI 01/12/2009 183
COMPANIES HOUSE

JNI 28/10/2009 407
COMPANIES HOUSE

TUESDAY

W

9-17-51
FEE PAID
CONTAINERS HOUSE

Register of members

If the register of members is not kept at the registered office, state here where it is kept

RM	
Post town	
County/Region	
Postcode	

Register of Debenture holders

If there is a register of debenture holders and it is not kept at the registered office, state here where it is kept

RD	
Post town	
County/Region	
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 Article 40

Private company limited by guarantee exempt under Article 40

Private unlimited company with share capital

Private unlimited company without share capital

Company Secretary

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

Name * Style / Title

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

* Voluntary details

T1	
T2	X
T3	
T4	
T5	
T6	
T7	

Please mark the appropriate box

Details of a new company secretary must be notified on form 296	
CS	
Emma	
Dignam	
AD	"Cillview"
Sandy Road, Rush	
Post town	
County/Region	Co. Dublin
Postcode	
Country	Ireland

Directors

Please list directors in alphabetical order

Name

* Style / Title

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

Other directorships

Details of a new director must be notified on form 296

CD Mr

Michael John

Bamber

AD 7 Alexandra Gate

Hollywood

Post town

County/Region Down

BT18 9FN

Country Northern Ireland

Postcode

Country

DO 30 05 1961

Nationality **NA** British

OC Bank Executive

OD See Attached List

Name

* Style / Title

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

Other directorships

CD

Tomas

Breathnach

AD 216

Limetree Avenue, Portmarnock

Post town

County/Region Co Dublin

Postcode

Country

Ireland

DO 21 10 1960

Nationality **NA** Irish

OC Head of Bancassurance

OD First Active Insurances Services Limited

* Voluntary details

Issued share capital

Enter details of all the shares in issue at the date of this return

Class	Number	Aggregate Nominal Value
Ordinary £1 00	100,000	£ 100,000 00
_____	_____	_____
_____	_____	_____
_____	_____	_____
Total		£ 100,000 00

Please mark the appropriate box(es)

There were no changes in the period ☒

on paper not on paper

A list of changes is enclosed ☐ ☐

A full list of members is enclosed ☐ ☐

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 returns

Elective resolutions
(Private companies only)

If an election is in force at the date of this return to dispense with annual general meetings, mark this box ☒

If an election is in force at the date of this return to dispense with laying accounts in general meetings, mark this box ☒

Certificate

I certify that the information given in this return is true to the best of my knowledge and belief

I enclosed the appropriate fee

Make cheques payable to the Department of Economic Development

Signed

Enkh Mignan

Date

26/10/09

Secretary/Director
(*Delete as appropriate)

This return includes

(enter number)

continuation sheets

To whom should Companies Registry direct any enquiries about the information shown in this return?

Ulster Bank - Group Secretariat

Group Secretariat Department, Block C - Second Floor, Ulster Bank G
Centre, George's Quay, Dublin

Postcode

2

Telephone

+353 1 608 5523

Extension

When you have signed the return send it with the fee to the Registrar of Companies at

Waterfront Plaza
8 Laganbank Road, Belfast BT1 3BS

NOTATION
1/10/13

SCHEDULE TO FORM 371Page 5

Other relevant directorships

Company Number NI 21247

Company Name Ulster Bank Insurance Services Limited

Directors Name Bamber, Michael John

Other directorships Camomile Ulster Investments (UK) Limited

Easycash (Ireland) Limited

First Active plc

Lenmul Limited

Ulster Bank (Ireland) Holdings

Ulster Bank Holdings (ROI) Limited

Ulster Bank Ireland Limited

Ulster Bank Limited

Ulster International Finance & Commercial Services Company Limited

Ulster Investments Limited