

Please complete in typescript, or in bold black capitals.

CHFP029

363a

Annual Return

Con	npany Number	1107543
Compar	ny Name in full	LLOYDS LEASING (NORTH SEA TRANSPORT) LIMITED
Date of this return		Day Month Year
The information in this retu	urn is made up to	2 8 / 0 2 / 2 0 0 2
Date of next return		
If you wish to make you to a date earlier than the	e anniversary	Day Marth Vari
of this return please sho Companies House will t		Day Month Year
at the appropriate time.		
Registered Office Show here the address	at the date of	71 LOMBARD STREET
this return.	at the date of	
Any change of registered office	Post town	LONDON
must be notified on form 287.	County / Region	LONDON
20.7	-	
	UK Postcode	EC3P3BS
Deimainal bysainaa	4::4!	
Principal busines		
Show trade classification for the principal activity		7484
If the code number car	anot he determined	
give a brief description		
		¬ When you have completed and signed the form please send it to the
		Pegistror of Companies at:

COMPANIES HOUSE For Crised September 1999

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 mer If the register of mem registered office, state	bers is not kept at the be here where it is kept.	
	Post town [County / Region]	UK Postcode
Register of Del If there is a register of or a duplicate of any of it, which is not kep office, state here whe	such register or part L t at the registered	N/A UK Postcode
Company type		
Public limited company		
Private company limited	d by shares	X
Private company limited share capital	d by guarantee without	
Private company limited section 30	d by shares exempt under	Please tick the appropriate box
Private company limite under section 30	d by guarantee exempt	
Private unlimited comp	any with share capital	
Private unlimited comp	any without share capital	
Company Sec (Please photocopy this area to provide details of joint sec- retaries).	retary Name * Style / Title	Details of a new company secretary must be notified on form 288a.
* Voluntary details.	Forename(s)	SHARON NOELLE
If a partnership give the names and addresses of the part-	Surname(s)	O'CONNOR .
ners or the name of the partnership and office address.	Address	176 BLAGDON ROAD
Usual residential address must be		L
given. In the case of a corporation, or a	P OSC LOWIT	NEW MALDEN
Scottish firm, give the registered or prin- cipal office address.	County / Region	SURREY UK Postcode K T 3 4 A L
	Country	
		Page 2

Directors Please list directors in	n alphabe		Details of new directors must be not	uned on form 200a	
	Name	* Style / Title	MR.		
Directors In the case of a director tha is a corporation or a Scottish firm, the	t	Date of birth	Day Month Year		
name is the corporate or firm name.		Forename(s)	ALLAN ROBERT		
		Surname	FOAD		
	Addres	ss	19 DUKES ORCHARD		
Usual residential address must be given. In the case of corporation or a Scottish firm, give th	e	Post town	BEXLEY		
registered or principa office address.	al ,	County / Region	KENT	UK Postcode D A 5	2 D U
		Country		Nationality BRITISH	
	Busin	ess occupation	BANKER		
* Voluntary details.					
	Name	* Style / Title	MR.		
Directors In the case of a director this a corporation or a Scottish firm, the		Date of birth	Day Month Year		
name is the corporate or firm name.		Forename(s)	MICHAEL JONATHAN		
		Surname	GREEN		
	Addr	ess	109 HAMPSTEAD WAY, HAMPSTEA	D GARDEN SUBURB	
Usual residential address must be					
given. In the case of corporation or a		Post towr	LONDON		
Scottish firm, give t registered or princi office address.		County / Region	1	UK Postcode N W 1 1	7 L R

Country | ENGLAND

Nationality | BRITISH

Directors Please list directors in	n alphabe		Details of new directors must be	notified on fo	rm 288a	
	Name	* Style / Title	MR.			
Directors In the case of a director that is a corporation or a Scottish firm, the	at	Date of birth	Day Month Year	•		
name is the corporate or firm name.		Forename(s)	ROGER STEUART			
		Surname	KING			
	Addres	SS	FLAT 3, 28 UPPER ADDISON GARDEN	NS		
Usual residential address must be given. In the case of corporation or a	ia	Post town	LONDON			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Scottish firm, give th registered or princip office address.		County / Region		UK Postcode	W 1 4 L	[8 [A [J
omos address.		Country	ENGLAND	Nationality	AMERICAN	
	Busin	ess occupation	CREDIT DIRECTOR			
* Voluntary details.						
	Name	* Style / Title	MR.		_	
Directors In the case of a director the is a corporation or a Scottish firm, the		Date of birth	Day Month Year			
name is the corpo- rate or firm name.		Forename(s)	PETER BERNARD			
		Surname	MILES			
	Addre	ess	BRENTWOOD HOUSE, WINCHESTE	R ROAD		
lleual recidential			1			

Post town | WEST MEON

Country | ENGLAND

County / Region | HAMPSHIRE

Business occupation | BANKER

address must be given. In the case of a

corporation or a Scottish firm, give the registered or principal

office address.

[1 | J | S

UK Postcode G U 3 2

Nationality | BRITISH

Please list directors i	in alphab	etical order.				
	Name	* Style / Title	MR.			
Directors In the case of a director that is a corporation or a	at	Date of birth	Day Month Year			
Scottish firm, the name is the corporate or firm name.		Forename(s)	DAVID PETER			
		Surname	PRITCHARD			
	Addre	ss	17 THORNEY CRESCENT			
Usual residential address must be given. In the case of	fa	-	LOUDON			
corporation or a Scottish firm, give the registered or princip	ne	Post town County / Region	LONDON	UK Postcode	S W 1 1	
office address.		Country	ENGLAND	Nationality	BRITISH	
	Busin	ess occupation	BANK DIRECTOR			
* Voluntary details.		+ O. J. 1711	MO			
	Name	* Style / Title	MR.		_	
Directors In the case of a director this a corporation or Scottish firm, the		Date of birth	Day Month Year 1 1 / 0 9 / 1 9 4 3			
name is the corporate or firm name.		Forename(s)	FREDERICK MICHAEL PETER			
		Surname	RIDING			
	Addr	ess	YORK HOUSE, CLIFTON DOWN ROA	AD		
Usual residential			1			
address must be given. In the case corporation or a		Post town	CLIFTON			
Scottish firm, give registered or princ office address.		County / Region	BRISTOL	UK Postcod	le B S 8	4 A
omeo addiodd.		Country	ENGLAND	Nationality	BRITISH	

Business occupation $\ \ | \ ^{\mathsf{BANKER}}$

Details of new directors must be notified on form 288a

Directors

Directors Rlease list directors in	n alphabeti		Details of new directors must be	notified on fo	orm 288a	
	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.	t	Date of birth Forename(s) Surname	Day Month Year 1			-
	Address		MARRONWOOD, 4 KELVEDON AVENU	JE		
Usual residential address must be given. In the case of corporation or a Scottish firm, give th registered or principa office address.	a e al C	Post town ounty / Region Country ss occupation	WALTON-ON-THAMES SURREY BANKER	UK Postcode Nationality	[K [T [1 [2 BRITISH	[5 E D
* Voluntary details.						
	Name	* Style / Title	MR.			
Directors In the case of a director the is a corporation or a Scottish firm, the name is the corpo-			Day Month Year 0 8 / 0 9 / 1 9 5 1		_	
rate or firm name.		Forename(s)				
		Surname	VOWLES			
	Addres	ss	HOPGARDENS, HOPGARDEN LANE			
Usual residential address must be						

Post town | SEVENOAKS

County / Region | KENT

Country

Business occupation | DIRECTOR

given. In the case of a

corporation or a Scottish firm, give the registered or principal

office address.

1 P X

UK Postcode T N 1 3

Nationality \mid BRITISH

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)	
	ORD SHARES OF £1	5,000	£ 5,000.00	
	Totals	5,000	£ 5,000.00	
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	There were no changes	s in the period		
returns.		on pape	r in another format	
	A list of changes is enc	losed		
	A full list of shareholder	rs is enclosed X		
Certificate	I certify that the information knowledge and belief.	ation given in this return	is true to the best of my	
Signed	Soil	Dat	e 14/03/2	
† 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	This return includ	es (enter number)	continuation sheets.	
Companies House.				
Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should contact if there is any query.	MS. S.N. O'CONNOR, 71 LOME	BARD STREET, LONDON, EC3P 3B	<u> </u>	
		Tel 020 7356 103	34	
	DX number	DX exchange		



List of past and present shareholders Schedule to form 363a

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Company Number	1107543				
Company Name in full	LLOYDS LEASING (NORTH SEA TRANSPORT) 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 			

- List the company shareholders in alphabetical order or provide an index List joint shareholders consecutively

Class and	Shares or amount of stock transferred (if appropriate)			
number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer		
ord shares of £1				
3,000		l		
-				
-				
_				
_				
_				
	number of shares or amount of stock held	Class and number of shares or amount of stock held ord shares of £1 (if approprious content of the shares and number of shares and number of shares or amount of stock transferred		