

### Companies House

— for the record —— Company Name

Company Type

Company Number

11th March 2005

**Shares** 

3182537

#### **CROWN UK HOLDINGS LIMITED**

**Private Company Limited By** 

Information extracted from

Companies House records on

list of activity codes.

063302/30

# 363s Annual Return

- > Please check the details printed in blue on this statement.
- > If any details are wrong, strike them through and write the correct details in the "Amended details" column.

> Please use black pen and write in capitals

Section 1: Company details



| Ref: 3182537/03/10                                                                                                                                    | Current details                                               | Amended details      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|----------------------|
| > Registered Office Address If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.     | Downsview Road<br>Wantage<br>Oxfordshire<br>OX12 9BP          | Address  UK Postcode |
| > Register of Members If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.           | Address where the Register is held  At Registered Office      | Address  UK Postcode |
| > Register of Debenture Holders If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column. | Not Applicable                                                | Address  UK Postcode |
| > Principal Business Activities If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column. | SIC Code Description  7415 Holding companies included offices | SIC CODE Description |
| > Please enter additional principal activity code(s) in "Amended details" column. See notes for guidance for                                          | •                                                             |                      |

**Section 2: Details of Officers of the Company** 

|                                                                                                                                                           | Current details                                                                           | Amended details                                                                                                                                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| > Company Secretary If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. | Name Jennifer Patricia SIMPSON  Address 14 Kershaw Road Eldene Swindon Wiltshire SN3 6BS  | Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.  Address |
| Particulars of a new Company Secretary must be notified on form 288a.                                                                                     |                                                                                           | UK Postcode                                                                                                                                                      |
| > Director  If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.         | Name John W CONWAY  Address 6059 Stoney Hill Road New Hope Pennsylvania Usa 18938         | Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.  Address |
| Particulars of a new Director<br>must be notified on form<br>288a.                                                                                        | Date of birth 19/05/1945  Nationality American  Occupation President & Chief Operating Of | UK Postcode  Date of birth  Nationality  Occupation  Date of change / /  Date John W CONWAY ceased to be director (if applicable)                                |

| <b>-</b> 0 | mpany Number - 3182537                                                                                                                          | Section 2: Details of Officers of the Comp                                                      | Amended details                                                                                                                                                         |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| >          | Director  If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. | Current details  Name John DAVIDSON  Address 66 Kings Drive Berrylands Surbiton Surrey KT5 8NH  | Name  Tick this box if this address is a service address for the beneficiary of a  Confidentiality Order granted under section 723B of the Companies Act 1985.  Address |
|            | Particulars of a new Director<br>must be notified on form<br>288a.                                                                              | Date of birth 27/08/1947  Nationality British  Occupation Lawyer                                | UK Postcode Date of birth// Nationality Occupation Date of change// Date John DAVIDSON ceased to be director (if applicable)                                            |
| >          | Director  If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. | Name<br>Alan Walter RUTHERFORD  Address 216 St Andrews Court Bluebell Pennsylvania Pa 19422 Usa | Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723E of the Companies Act 1985.  Address        |
|            | Particulars of a new Director<br>must be notified on form<br>288a.                                                                              | Date of birth 28/10/1943  Nationality British  Occupation Chief Financial Officer               | UK Postcode                                                                                                                                                             |

**Section 3: Share Capital** 

|   |                                                                                                                                | Current details                                      | Amended details                          |
|---|--------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|------------------------------------------|
| > | Issued Share Capital This table shows the total                                                                                | Class of share Ordinary                              | Class of share                           |
|   | number of shares that have<br>been issued by your<br>company and their Nominal                                                 | Nominal value of each share £1.00                    | Nominal value of each share              |
|   | Value. If any of the details are wrong, please fill in the correct details.                                                    | Number of shares issued 390,880                      | Number of shares issued                  |
|   |                                                                                                                                | Aggregate Nominal Value of issued shares £390,880.00 | Aggregate Nominal Value of issued shares |
|   | Total shares issued and value                                                                                                  | Total number of shares issued 390,880                | Total number of shares issued            |
|   | If any of the details are wrong,<br>strike them through and fill in<br>the correct details in the<br>"Amended details" column. | Total Nominal value of shares issued £390,880.00     | Total Nominal value of shares issued     |

<sup>&</sup>gt; At the date of this Annual Return, if the company has altered or changed its share capital in any way or allotted new shares, please refer to the guidance notes for details of the appropriate form that should be sent with this Annual Return. Annual return guidance notes are available on the Companies House web site at www.companieshouse.gov.uk or by ringing 0870 3333636.

### Section 4: Details of Shareholders

- > The details we hold on your company's shareholders and their shareholdings are printed below. These are based on your last Annual Return.
- > If any details have changed, or if any shares have been transferred, please fill in the details in the "Amended details" or "Shares transferred" column.
- > Please give details of any other shareholders in Section 5.

| Current details                                                                     | Amended details          | Shares transferred                                |
|-------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------|
| Shareholder<br>Name<br>CROWN CANADIAN<br>HOLDINGS ULC                               | Name                     |                                                   |
|                                                                                     | Address                  |                                                   |
| Address<br>Suite 900<br>1959 Upper Water Street<br>Halifax<br>Nova Scotia<br>Canada | UK Postcode              | Shares transferred by CROWN CANADIAN HOLDINGS ULC |
| B3J 2XZ<br>Shares held<br>Class Number<br>Ordinary 390880                           | Shares held Class Number | Class Number Date of transfer                     |
|                                                                                     |                          |                                                   |

### **Section 5: Details of Other Shareholders**

- > Please fill in details of any persons or corporate bodies who are share holders of the company at the date of this return, but whose details are not printed in Section 4.
- > Also, provide the details of any persons who became but have ceased to be shareholders of the company since the date of the last annual return.
- > For jointly held shares please list those joint shareholders consecutively on the form. If a joint shareholder also holds shares in their own right, list that holding separately.
- > Please copy this page if there is not enough space to enter all the company's other shareholders.

| Shareholders details | Class and number of<br>shares or amount of<br>stock transferred<br>(If appropriate) |  |
|----------------------|-------------------------------------------------------------------------------------|--|
| Name                 |                                                                                     |  |
| Address              |                                                                                     |  |
| L                    |                                                                                     |  |
|                      |                                                                                     |  |
| UK Postcode          |                                                                                     |  |
| Name                 |                                                                                     |  |
| Address              |                                                                                     |  |
|                      |                                                                                     |  |
| UK Postcode          | ·                                                                                   |  |
| Name                 |                                                                                     |  |
| Address              |                                                                                     |  |
|                      |                                                                                     |  |
| UK Postcode          |                                                                                     |  |
|                      |                                                                                     |  |
| Name                 |                                                                                     |  |
| Address              |                                                                                     |  |
| <u> </u>             |                                                                                     |  |
| UK Postcode          |                                                                                     |  |



## 363s Annual Return Declaration

- > When you have checked all the sections of this form, please complete this page and sign the declaration below.
- If you want to change the made up date of this annual return, please complete 2 below.

| 1.         | Declaration                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                        |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|            | I confirm that the details in (shown at 2 below). I enclo                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | are correct as at the made-up-date f £30.                                                                                                                                                                              |
|            | Signature J. P. S. (Director / S                                                                                                                                                                                                                                    | moon                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 0多/ 0 7 / 5 6 6 を<br>Date                                                                                                                                                                                              |
|            |                                                                                                                                                                                                                                                                     | ecretary)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | This date must not be earlier than the return date at 2 below                                                                                                                                                          |
|            | What to do now  Complete this page then se declaration to the address                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                        |
| 2          | . Date of this return                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                        |
|            | This AR is made up to<br>3/4/2005                                                                                                                                                                                                                                   | If you are making please give the d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | g this return up to an earlier date,<br>date here                                                                                                                                                                      |
|            |                                                                                                                                                                                                                                                                     | / _                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | - /                                                                                                                                                                                                                    |
|            |                                                                                                                                                                                                                                                                     | Note: The form mus                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | t be delivered to CH within 28 days of this date                                                                                                                                                                       |
| 3          | . Date of next return                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                        |
|            | If you wish to change your                                                                                                                                                                                                                                          | next return to a d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ate earlier than 3rd April 2006                                                                                                                                                                                        |
|            | please give the new date h                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | _ /                                                                                                                                                                                                                    |
|            |                                                                                                                                                                                                                                                                     | /                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                        |
|            |                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                        |
| 4          | . Where to send this f                                                                                                                                                                                                                                              | orm                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                        |
| 4          | . Where to send this f Please return this form to:                                                                                                                                                                                                                  | orm                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                        |
| 4          | Please return this form to:  Registrar of Companies                                                                                                                                                                                                                 | orm                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | For members of the Hays Documen                                                                                                                                                                                        |
| 4          | Please return this form to:  Registrar of Companies Companies House                                                                                                                                                                                                 | <b>orm</b><br>OR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | For members of the Hays Document<br>Exchange service                                                                                                                                                                   |
| 4          | Please return this form to:  Registrar of Companies                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | For members of the Hays Documen                                                                                                                                                                                        |
| 4          | Please return this form to:  Registrar of Companies Companies House Crown Way Cardiff CF14 3UZ                                                                                                                                                                      | OR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | For members of the Hays Document<br>Exchange service                                                                                                                                                                   |
| 4          | Please return this form to:  Registrar of Companies Companies House Crown Way Cardiff CF14 3UZ                                                                                                                                                                      | OR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | For members of the Hays Documen<br>Exchange service<br>DX 33050 Cardiff                                                                                                                                                |
|            | Please return this form to:  Registrar of Companies Companies House Crown Way Cardiff CF14 3UZ  Have you enclosed the file                                                                                                                                          | OR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | For members of the Hays Documen<br>Exchange service<br>DX 33050 Cardiff                                                                                                                                                |
| Yo         | Please return this form to:  Registrar of Companies Companies House Crown Way Cardiff CF14 3UZ  Have you enclosed the fireverse of the cheque?  Contact Address  u do not have to give any companies House to contact y                                             | OR  Iling fee with the ontact information ou if there is a qu                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | For members of the Hays Documen<br>Exchange service<br>DX 33050 Cardiff<br>company number written on the<br>below, but if you do, it will help<br>ery on the form. The contact                                         |
| Yo Co info | Please return this form to:  Registrar of Companies Companies House Crown Way Cardiff CF14 3UZ  Have you enclosed the fireverse of the cheque?  Contact Address  u do not have to give any companies House to contact your promote that you give will be companies. | OR  Iling fee with the entact information ou if there is a que visible to search                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | For members of the Hays Document Exchange service DX 33050 Cardiff   company number written on the below, but if you do, it will help ery on the form. The contact hers of the public record.                          |
| Yo Co info | Please return this form to:  Registrar of Companies Companies House Crown Way Cardiff CF14 3UZ  Have you enclosed the fireverse of the cheque?  Contact Address  u do not have to give any companies House to contact y                                             | OR  Iling fee with the entact information to a query in there is a query in the entact | For members of the Hays Document Exchange service DX 33050 Cardiff  company number written on the below, but if you do, it will help ery on the form. The contact there is of the public record. Shone number inc code |
| Yo Coo     | Please return this form to:  Registrar of Companies Companies House Crown Way Cardiff CF14 3UZ  Have you enclosed the fireverse of the cheque?  Contact Address  u do not have to give any companies House to contact your promote that you give will be companies. | OR  Iling fee with the entact information ou if there is a que visible to search  Telep  DX n                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | For members of the Hays Document Exchange service DX 33050 Cardiff   company number written on the below, but if you do, it will help ery on the form. The contact hers of the public record.                          |

Postcode