



Companies House

— for the record —

Company Name

**THE CITY FIRE INSURANCE
COMPANY LIMITED**

Company Type

**Private Company Limited By
Shares**

Company Number

1184193

Information extracted from
Companies House records on
12th May 2001

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.



A02
COMPANIES HOUSE

A7C641RU

0897
23/06/01

Section 1: Company details

Ref: 1184193/03/10

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.

**24B Lime Street
London
EC3M 7HR**

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
6603	Non-life insurance

SIC CODE	Description
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

- > *Please enter additional principal activity code(s) in "Amended details" column. See notes for guidance for list of activity codes.*

	Current details	Amended details
> Company Secretary <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Company Secretary must be notified on form 288.</i>	Name Michael Edward FEAVER Address Dolphins Derby Road Haslemere Surrey GU27 1BP	Name Address UK Postcode _ _ _ _ _ Date of change _ _ / _ _ / _ _ _ _ Date Michael Edward FEAVER ceased to be secretary (if applicable) _ _ / _ _ / _ _ _ _
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name Bar Cochva BEN-GERA Address 16 Keken Hayessod Street Rishon Le Zion Israel Date of birth 04/05/1942 Nationality Israel Occupation Insurance Executive	Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Bar Cochva BEN-GERA ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name Ronald Kenneth BISHOP Address 23 The Willows Chesham Bois Amersham Buckinghamshire HP6 5NT Date of birth 14/07/1926 Nationality British Occupation Insurance Company Official	Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Ronald Kenneth BISHOP ceased to be director (if applicable) _ _ / _ _ / _ _ _ _

Amended details

Name _____

Address

UK Postcode _ _ _ _ _ _ _

Date of birth _ _ / _ _ / _ _ _ _

Nationality _____

Occupation _____

Date of change / /

Date Richard Walter FIELDING ceased
to be director (if applicable)

Name _____

Address

UK Postcode _ _ _ _ _ _ _ _

Date of birth / /

Nationality _____

Occupation _____

Date of change / /

Date Joseph David HACKMEY ceased

Date Joseph David HACKMEY ceased
to be director (if applicable)

Name

Address

UK Postcode _____

Date of birth _ _ / _ _ / _ _ _ _

Nationality

Occupation _____

Date of change / /

Date Miron Chaim IZAKSON ceased to be director (if applicable)

11/11/2011

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	Current details	Amended details
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name George Thomas KANFER Address 11 Spaniards End Hampstead London NW3 1JG Date of birth 14/08/1948 Nationality British Occupation Company Director	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date George Thomas KANFER ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name Nitza KANFER Address 11 Spaniards End Hampstead London NW3 7JG Date of birth 01/01/1957 Nationality Israeli Occupation Lawyer	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Nitza KANFER ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name David Neville VERMONT Address 3 Morgan House 127 Longacre London WC2E 9AA Date of birth 13/02/1931 Nationality British Occupation Reinsurance Consultant	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date David Neville VERMONT ceased to be director (if applicable) _ _ / _ _ / _ _ _ _

	Current details	Amended details
> Director	Name John Michael WARNER	Name _____
<i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Address Tall Pines 153A Amersham Road Beaconsfield Buckinghamshire HP9 2EH	Address _____ _____ _____
	Date of birth 06/04/1931	UK Postcode _____ Date of birth ____ / ____ / ____ Nationality _____
	Nationality British	Occupation _____
<i>Particulars of a new Director must be notified on form 288.</i>	Occupation Insurance Consultant	Date of change ____ / ____ / ____ Date John Michael WARNER ceased to be director (if applicable) ____ / ____ / ____

	Current details	Amended details
> Issued Share Capital <i>This table shows the total number of shares that have been issued by your company and their Nominal Value. If any of the details are wrong, please fill in the correct details.</i>	Class of share Ordinary Nominal value of each share £1.00 Number of shares issued 12,500,000 Aggregate Nominal Value of issued shares £12,500,000.00	Class of share Nominal value of each share Number of shares issued Aggregate Nominal Value of issued shares
> Total shares issued and value <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Total number of shares issued 12,500,000 Total Nominal value of shares issued £12,500,000.00	Total number of shares issued Total Nominal value of shares issued
> 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 Name HADAR INSURANCE CO. LTD Address 30 Levontin Street Telaviv Israel Shares held Class Ordinary Number 12500000		Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Shares held Class _____ Number _____ _____ _____		Shares transferred by HADAR INSURANCE CO. LTD Class Number Date of transfer _____ _____		

Section 5: Details of Other Shareholders

- > Please fill in details of any persons or corporate bodies who are shareholders 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 shares or amount of stock held	Class and number of shares or amount of stock transferred (If appropriate)	Date of registration of transfer (If appropriate)
Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _			
Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _			
Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _			
Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _			



Companies House

— for the record —

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 this annual return are correct as at the made-up-date (shown at 2 below). I enclose the filing fee of £15.

Signature M. E. FEAVER
(Director / Secretary)

Date 19, 06, 2001

This date must not be earlier than the return date at 2 below

What to do now

Complete this page then send the whole of the Annual Return and the declaration to the address shown at 4 below.

2. Date of this return

- ☐ This AR is made up to 29/5/2001 If you are making this return up to an earlier date, please give the date here

__ / __ / ____

Note: The form must 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 date earlier than **29th May 2002** please give the new date here:

__ / __ / ____

4. Where to send this form

- ☐ Please return this form to:
Registrar of Companies
Companies House
Crown Way
Cardiff CF14 3UZ
- OR
- For members of the Hays Document Exchange service
DX 33050 Cardiff

Have you enclosed the filing fee with the company number written on the reverse of the cheque?

Cheque ☒ Postal Order ☐ Cheque / Postal Order Number 005788

(Please complete as appropriate)

Contact Address

Please give the name and address of the person who should be contacted if there are any queries about this form.

Contact Name M. E. FEAVER

Telephone number inc code 0207 929 2617

Address THE CITY FIRE INSURANCE
CO LTD
24 BLIND ST
LONDON

DX number if applicable

DX exchange

Postcode EC3M 7HS