

Please complete in typescript, or in bold black capitals.

150×10 204615

363a

Annual Return

1618133

Company Name in full

Devonport Underwriting Agency Limited		



Date of this return(See note 1) The information in this return is made up to

Day	Month	Year
01	05	1998

Date of next return(See note 2)

If you wish to make your next return to a date earlier than the anniversary of this return please show the date here. Companies House will then send a form at the appropriate time.

Day	Month	Year
01	05	1999

TEN TRINITY SQUARE

Registered Office (See note 3) Show here the addressat the date of this return.

Any change of registered office mustbe notified on form 287.

Post town

LONDON

County / Region

Postcode

EC3P 3AX

Principal business activities

(See note 4)

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

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7499			
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If the code number cannot be determined, give a brief description of principal activity.



When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh

Register of members of the register of members registered office, state her	is not kept at the					
	Post town					
	County / Region				Postcode	
Register of Debent (See note 6) If there is a register of debend it is not kept at the restate here where it is kept	penture holders egistered office,					
	Post town					
	County / Region				Postcode	
Company type (See	note 7)					
Public limited company						
Private company limited by sh	hares	X				
Private company limited by gushare capital	uarantee without					
Private company limited by st section 30	hares exempt under		Pleas	se mark the	appropriate bo	×
Private company limited by gunder section 30	uarantee exempt					
Private unlimited company wi	ith share capital					
Private unlimited company wi	ithout share capital					
Company Secreta	ry (see notes 1-5)	Details of a ne	ew compan	ny secretary	must be notifie	ed on form 288a.
(Please photocopy this area to provide details of joint	* Style / Title				*Honours etc	
secretaries).	Forename(s)	TRACY MARINA	4			
* Voluntary details.	Surname	WARREN				
Prev	rious forename(s)					
Pre	vious surname(s)					
Addres	ss	THE MOLEHILL				
Usual residential	HOLLOW ROAD, MOLEHILL GREEN					
address must be given. In the case of a corporation, give the	Post town	NR FELSTED, D	WOMNU			
registered or principal office address.	County / Region	ESSEX			Postcode	CM6 3JF

Please list directors in a		Details of new directors	must be notified on form	288a			
Name	* Style / Title			Day Month Yea	ar		
	* Honours etc		Date of birth	04 07 1948	8		
	Forename(s)	RICHARD JOHN STAFFORD					
	Surname	BUCKNALL					
Prev	vious forename(s)						
Pre	evious surname(s)						
Address	s	21 THE GREEN, KESWICK G	GARDENS				
Usual residential address must be		FETCHAM					
given. In the case of a corporation, give the	Post town	LEATHERHEAD					
registered or principal office address.	County / Region	SURREY	Postcode	KT22 9XE			
	Country		Nationality	BRITISH			
Busines	s occupation	INSURANCE BROKER					
Other d	lirectorships	LA COUPE INSURANCE LIM	ITED				
* Voluntary details.							
Name	* Style / Title			Day Month Yea	ar		
	* Honours etc		Date of birth	18 10 1955	5		
	Forename(s)	ANDREW					
	Surname	DENNIS					
Prev	vious forename(s)						
Pre	evious surname(s)						
Address	s	SPRING HOUSE, SCHOOL L	ANE, LOWER UFFORD				
Usual residential addressmust be		NR WOODBRIDGE					
given. In the case of a corporation, give the registered or principal	Post town						
office address.	County / Region	SUFFOLK	Postcode	IP13 6DX			
	Country		Nationality	BRITISH			
Busines	s occupation	ACCOUNTANT					
Other d	lirectorships	NO OTHER DIRECTORSHIPS					

Please list director	tes 1-5) rs in alphabetical order	Details of new director	s must be notific	ed on form	288a.		
	* Style / Title				Day	Month	Year
	* Honours etc		Dat	e of birth	12	11	1943
	Foreneme(s)	DAVID JOHN					
	Surname	SPARKES					
	Previous forename(s)						
	Previous surname						
Ac	ddress	24 CANONSFIELD ROAD					•••
Usual residential	1						
address must be given. In the case		WELWYN					
corporation, give registered or princ	the	HERTFORDSHIRE		Postcode	AL6 O	ΩH	
office address.	Country						
Na	ationality	BRITISH					
Bu	siness occupation	INSURANCE EXECUTIVE					
Ot	ther directorships	NO OTHER DIRECTORSHI	PS				
Na	ame * Style / Title				Dav	Month	Vear
Na	* Style / Title		Dat	e of birth	Day	Month	Year
Na	•		Dat	e of birth	Day	Month	Year
Na	* Honours etc		Dat	e of birth [Day	Month	Year
Na	* Honours etc Forename(s)		Dat	e of birth [Day	Month	Year
N a	* Honours etc Forename(s) Surname		Dat	e of birth	Day	Month	Year
	* Honours etc Forename(s) Surname Previous forename(s) Previous surname		Dat	e of birth	Day	Month	Year
	* Honours etc Forename(s) Surname Previous forename(s)		Dat	e of birth	Day	Month	Year
Ac <i>Usual residential</i> <i>address</i> must be	* Honours etc Forename(s) Surname Previous forename(s) Previous surname		Dat	e of birth [Day	Month	Year
Usual residential address must be given. In the case corporation, give	* Honours etc Forename(s) Surname Previous forename(s) Previous surname ddress of a Post town the		Dat		Day	Month	Year
Ac <i>Usual residential</i> <i>address</i> must be given. In the case	* Honours etc Forename(s) Surname Previous forename(s) Previous surname ddress of a Post town the cipal County / Region		Dat	e of birth [Day	Month	Year
Usual residential address must be given. In the case corporation, give registered or prince office address.	* Honours etc Forename(s) Surname Previous forename(s) Previous surname ddress for a Post town the County / Region Country		Dat		Day	Month	Year
Usual residential address must be given. In the case corporation, give registered or princoffice address.	* Honours etc Forename(s) Surname Previous forename(s) Previous surname ddress Post town the Cipal County / Region Country		Dat		Day	Month	Year
Usual residential address must be given. In the case corporation, give registered or princoffice address. Na Bu	* Honours etc Forename(s) Surname Previous forename(s) Previous surname ddress for a Post town the County / Region Country		Dat		Day	Month	Year
Usual residential address must be given. In the case corporation, give registered or princoffice address. Na Bu	* Honours etc Forename(s) Surname Previous forename(s) Previous surname ddress for a Post town the cipal County / Region Country ationality usiness occupation		Dat		Day	Month	Year

Issued share capital/see note 9) Enter details of all the shares in issue at the date of this return.	(e.g. Ordinary/Preference) shares issued		Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share)		
	ORD £1.00	1,000	£ 1,000.00		
	Totals	1,000	£ 1,000.00		
List of past and present members (Use attached schedule where appropriate) A full list is required if one was not	There were no changes	s in the period X			
included with either of the last two returns.		on paper	in another format		
(see note 10)	A list of changes is end	closed			
	A full list of members is				
Elective resolutions (Private companies only) (See note 11)	If at the date of this re-	turn an election is in fo annual general meeting	gs mark this box		
	If at the date of this real laying according	turn an election is in fo ounts in general meetin	gsmark this box		
Certificate	I certify that the inform knowledge and belief.	nation given in this retu	rn is true to the best of my		
Signed	MA	Date	8/5/98		
† Please delete as appropriate.	† a director/secretary				
When you have signed the return send it with the fee to the Registrar of Compani Cheques should be made payable to Companies House.		co (enter number)	ntinuation sheets.		
Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should	MISS J D HERBERT, , TEN TRINIT	Y SQUARE, LONDON, EC3P 3AX			
contact if there is any query.	Tel 0171 481 7093				
	DX number	DX exchange			