

² 363a

Annual Return

Company	Number
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2284701

Company Name in full | Allied Irish Banks Independent Financial Services Limited 2284701



Date of this return (See note 1)

The information in this return is made up to

Day Month Year

01 11 97

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.

Month Year Day

11 98 01

Registered Office (See note 3)

Show here the address at the date of this return.

Any change of registered office must be notified on form 287.

Post town

County / Region

Postcode

Bankcentre - Britain

Belmont Road

Uxbridge

Middlesex

UB8 1SA

Principal business activities

(See note 4)

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

If the code number cannot be determined,

6601

give a brief description of principal activity.



When you have completed and signed the form please send it to Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff for companies registered in England and Wales or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh

Register of memb				
If the register of memb registered office, state	• •			
	Post town			
	County / Region		Postcode	
Register of Deber	nture holders			
(See note 6) If there is a register of and it is not kept at the state here where it is k	e registered office,			
	Post town			
	County / Region		Postcode	
Company type (s	See note 7)			
Public limited company	,			
Private company limited	by shares	✓		
Private company limited share capital	by guarantee without			
Private company limited under section 30	by shares exempt		Please mark the app	ropriate box
Private company limited exempt under section 30				
Private unlimited compa	ny with share capital			
Private unlimited compa	ny without share capital			
Company Secret	ary (See notes 1-5)	Details of a new company	secretary must be n	otified on form 288a.
(Please photocopy this area to provide Nar	me * Style / Title	Ms	* Honours etc	
details of joint secretaries).	Forename(s)	Margaret Celine		
	Surname	Kilgallon		
* Voluntary details.	Previous forename(s)			
	Previous surname(s)			
Add	dress	13 Hollywood Court	/	
		Inglis Road		
Usual residential				
address must be	Post town	Ealing		
given. In the case of a corporation, give the	County / Region	London	Postcode	W5 3RJ
registered or principal office address.	Country	England		

Please list directors	•		Details of new directors mu	st be notified on f	orm 28	8a.		
•	Name	* Style / Title	Ms		Day	Month	Year	
		* Honours etc		Date of birth	11	06	53	
		Forename(s)	Joan Geraldine	<u> </u>		. I 		
		Surname	Mulcahy					
	Previo	ous forename(s)						
	Previ	ious surname(s)						
Address			11 Kings Road					
			East Sheen					
Usual residential								
address must be given. In the case of		Post town	London		. : 44			
corporation, give the registered or princip)	County / Region		Postcode	SW14 8I	SW14 8PF		
office address.		Country	England	Nationality	Irish			
Business occupation			Financial Controller					
	Oth	er directorships	None					
* Voluntary details.				7				
Directors	Name	* Style / Title	Mr	<u> </u>	Day	Month	Year	
		* Honours etc		Date of birth	24	10	46	
		Forename(s)	Stephen Charles					
Surname Previous forename(s) Previous surname(s)			Smith					
Address		'Kirklands'						
			Arford					
Usual residentia	i							
address must be given. In the case of	fa	Post town	Headley Near Bordon					
corporation, give th registered or princip		County / Region				вт		
office address.		Country	England	Nationali	ty Engli	sh		
	Busi	ness occupation	Head of Investment Services	3				
Other directorships None								

Issued share capital (See notes 9)

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

Class

(e.g. Ordinary/Preference)

Number of shares issued

Aggregate Nominal Value

(i.e Number of shares issued multiplied by nominal value per share)

Or	dinary Shares		2	£2.00
	Totals		2	£2.00
List of past and present members (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two returns.	There were no changes	in the period		
(see note 10)	A list of changes is enclo		paper	in another format
	A full list of members is e	enclosed		
Elective resolutions (Private companies only) (see note 11)	If at the date of this retur	annual general m	eetings, r	dispense with
Certificate	I certify that the informat knowledge and belief.	ion given in this re	turn is tr	ue to the best of my
Signo	ed M. Kilgallo-	⊸ . Da	te	th Nov. 197
When you have signed the return send with the fee to the Registrar of Compar Cheques should be made payable to Companies House.		udes 2		ntinuation sheets.
Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should contact if there is any query.	Mr. Daniel J. Coveney Office of the Secretary AIB Group, Bankcentre, Ballsbrid	y,		

Directors (Cont		etical order.	Details of ne	w directors	must be notified on	form	า 288	a.	
Name * Style / Title		* Style / Title	Mr			D	ay	Month	Year
		* Honours etc			Date of birth	1 0)4	08	47
Forename(s)			Francis Xav	vier					
		Surname	Sullivan						-
	Prev	vious forename(s)							
	Pre	vious surname(s)							
	Address	\$				·		· · · · · · · · ·	
			72 Burkes F	Road,					
Usual residential	1								
address must be given. In the case of		Post town	Beaconsfie	ld			,		
corporation, give the registered or princip	€	County / Region	Buckingham	pshire	Postcode	HP9	1EP		
office address.		Country	England		Nationali	ty	ish		
	Bus	iness occupation	Banker						
	Ot	her directorships	(See contin	uation shee	t).				
* Voluntary details.									
Directors	Name	* Style / Title					Day	Month	Year
		* Honours etc			Date of birt	h 🗌			
		Forename(s)							
		Surname							
	Pre	vious forename(s)							
	Pre	evious surname(s)				-			
Address							·		
									-
									
Usual residentia address must be		Post town	_						
given. In the case of corporation, give the	e	County / Region			Postcode	÷	•		::
registered or princi office address.	pai	Country			Nationa	lity			
	Bus	siness occupation							
	^	4la a u aliua a4a uala!ua a					·		

Form 363a continuation sheet

Company Number	2284701		
Company Name in full	Allied Irish Banks Independent Financial Se	rvices Limited 2284701	
Past directorships for Mr Fr	ancis Xavier Sullivan		
Planthird Limited	(31-Dec-1996)		
			;

List of past and present members Schedule to form 363a and 363b

Company Number 2284701 Company Name in full | Allied Irish Banks Independent Financial Services Limited 2284701 Number of shares Particulars of shares or stock transferred since the date of the last return (or in the case of the or amount of stock held by first return, since the incorporation of the existing members company) by (a) persons who are still members, and at date of this return. (b) persons who have ceased to be members. Date of Number or Number or registration amount amount Remarks Name and address currently held Transferred of transfer AIB Holdings (U.K.) Limited 1537194 Bankcentre - Britain, Belmont Road, Uxbridge, Middlesex, UB8 1SA, England **Ordinary Shares** 1 Ms Claire Gertrude Scully **Ordinary Shares** 1