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Please complete in typescript, or in bold black capitals.

C



# 363a

CHFP036	Alliuai Neturii
Company Number	4063798
Company Name in full	ADVANCED VEHICLE CONTRACTS LIMITED
Date of this return	Day Month Year
The information in this return is made up to	0 1 / 0 9 / 2 0 0 1
Date of next return	
If you wish to make your next return to a date earlier than the anniversary	Day Month Year
of this return please show the date here. Companies House will then send a form at the appropriate time.	
Registered Office Show here the address at the date of this return.	THORPE HOUSE, 17 DORMER PLACE
	L
Any change of Post town registered office	LEAMINGTON SPA
must be notified County / Region on form 287.	WARWICKSHIRE
UK Postcode	C V 3 2 5 A A
Principal business activities	
Show trade classification code number(s)	ı <b>7484</b>
for the principal activity or activities.	
If code number cannot be determined, give a brief description of principal activity.	<u></u>
	<u> </u>
	When you have completed and signed the form please send it to the
	Registrar of Companies at:



for companies registered in England and Wales

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

Form revised September 1999

Register of members If the register of members is no	ot kept at the	
registered office, state here wh	nere it is kept.	L
	Post town	L
Со	unty / Region	LUK Postcode L_ L_ L_ L_ L_ L_
Register of Debenture ho If there is a register of debentu or a duplicate of any such regis of it, and it is not kept at the re- office, state here where it is ke	re holders, ster or part gistered ept.	
	Post town	1
Со	unty / Region	UK Postcode
Company type		
Public limited company		
Private company limited by shares	<b>;</b>	
Private company limited by guarar share capital		
Private company limited by shares exempt under section 30		Please mark the appropriate box
Private company limited by guarar under section 30	ntee exempt	
Private unlimited company with sha	are capital	
Private unlimited company without	share capital	
Company Secretary		Details of a new company secretary must be notified on form 288a.
(r lease priotecopy	* Style / Title	ı MR
this area to provide Name details of joint sec retaries).	Forename(s)	STEPHEN DENIS
* Voluntary details	Surname	
If a partnership give the names and addresses of the part- ners or the name of the partnership and office address	od, na no	HUSSEY  FLAT 2, 33 RUSSELL TERRACE
Usual residential	Post town	
address must be	untu / Dogios	LEAMINGTON SPA
given. In the case of a corporation or a	unty / Region	WARWICKSHIRE UK Postcode C V 3 1 1 E Z
Scottish firm, give the registered or prin-	Country	ENGLAND
cipal office address.		Page 2

			Details of new directors must be notified on form 288a
Please list directors in alphabetical order.			
ŀ	Name	*Style / Title	MR
			Day Month Year
<b>Directors</b> In the			•
case of a director that		Date of birth	1 2 / 1 12 / 1 19 6 5
is a coroporation or a Scottish firm, the		<b>.</b>	
name is the corpo-		Forename(s)	STEPHEN DENIS
ration or firm name.		Surname	
			HUSSEY
	Addres	SS	FLAT 2, 33 RUSSELL TERRACE
Usual residential			
address must be	<b>:</b>	Post town	
given. In the case of a		1 331 13111	LEAMINGTON SPA
corporation or a Scottish firm, give the		County / Region	WARWICKSHIRE UK Postcode c v 3 1 1 E Z
registered or principal office address		. , 3:	
Office address		Country	ENGLAND Nationality BRITISH
1	Rusines	s occupation	
•	Daomo	o occupation.	DIRECTOR
-			
elictoh vactaulo\/*			
*Voluntary details			
•	Name	* Style / Title	) MD
•	Name	* Style / Title	MR
<b>Directors</b> In the case of a director that		* Style / Title	
Directors in the		·	Day Month Year
Directors In the case of a director that is a coroporation or a Scottish firm, the name is the corpo-		·	
<b>Directors</b> In the case of a director that is a coroporation or a Scottish firm, the		·	Day Month Year [2 4 / 0 1 / 1 9 5 6
Directors In the case of a director that is a coroporation or a Scottish firm, the name is the corpo-		Date of birth Forename(s)	Day Month Year
Directors In the case of a director that is a coroporation or a Scottish firm, the name is the corpo-		Date of birth	Day Month Year [2 4 / 0 1 / 1 9 5 6
<b>Directors</b> In the case of a director that is a coroporation or a Scottish firm, the name is the corporation or firm name.		Date of birth Forename(s)	Day Month Year  2 4 / 0 1 / 1 9 5 6  MICHAEL ANTHONY  QUINN
Directors In the case of a director that is a coroporation or a Scottish firm, the name is the corporation or firm name.  A Usual residential		Date of birth Forename(s)	Day Month Year  2 4 / 0 1 / 1 9 5 6  MICHAEL ANTHONY
Directors In the case of a director that is a coroporation or a Scottish firm, the name is the corporation or firm name.  A Usual residential address must be		Date of birth Forename(s)	Day Month Year  2 4 / 0 1 / 1 9 5 6  MICHAEL ANTHONY  QUINN
Directors In the case of a director that is a coroporation or a Scottish firm, the name is the corporation or firm name.  A Usual residential address must be given. In the case of a corporation or a		Date of birth Forename(s) Surname	Day Month Year  2 4 / 0 1 / 1 9 5 6  MICHAEL ANTHONY  QUINN
Directors In the case of a director that is a coroporation or a Scottish firm, the name is the corporation or firm name.  A Usual residential address must be given. In the case of a corporation or a Scottish firm, give the		Date of birth Forename(s)	Day Month Year  2 4 / 0 1 / 1 9 5 6  MICHAEL ANTHONY  QUINN
Directors In the case of a director that is a coroporation or a Scottish firm, the name is the corporation or firm name.  A Usual residential address must be given. In the case of a corporation or a	ddress	Date of birth Forename(s) Surname Post town	Day Month Year  2 4 / 0 1 / 1 9 5 6  MICHAEL ANTHONY  QUINN  3 THE COURTYARD, BRIDGE END  WARWICK
Directors In the case of a director that is a coroporation or a Scottish firm, the name is the corporation or firm name.  A Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal	ddress	Date of birth Forename(s) Surname	Day Month Year  2 4 / 0 1 / 1 9 5 6  MICHAEL ANTHONY  QUINN  3 THE COURTYARD, BRIDGE END
Directors In the case of a director that is a coroporation or a Scottish firm, the name is the corporation or firm name.  A Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal	ddress	Date of birth Forename(s) Surname Post town	Day Month Year  2 4 / 0 1 / 1 9 5 6  MICHAEL ANTHONY  QUINN  3 THE COURTYARD, BRIDGE END  WARWICK
Directors In the case of a director that is a coroporation or a Scottish firm, the name is the corporation or firm name.  A Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address	ddress	Date of birth Forename(s) Surname Post town County / Region	Day Month Year  2 4 / 0 1 / 1 9 5 6  MICHAEL ANTHONY  QUINN  3 THE COURTYARD, BRIDGE END  WARWICK  WARWICKSHIRE  UK Postcode C V 3 4 6 P D

#### Issued share capital

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

#### Class

(e.g. Ordinary/Preference)

#### Number of shares issued

## Aggregate ,— Nominal Value

(i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)

	ORDINARY	L	100	£100.00
		L		L
	L	L		
		L		
	Totals		100	£100.00
List of past and present shareholders (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two	There were no changes	in the period		
returns.	A list of changes is enclo	osed	on paper	in another format
	A full list of members is e	enclosed	1	
Certificate	I certify that the informati knowledge and belief.	ion given in th	is return is t	rue to the best of my
Signed	M.A.QL	Min	Date	24/8/01
†Please delete as appropriate	† a director / secretary			
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House.	This return include	es 2 (enter nun		nuation sheets.
Please give the name, address,	JERROM ASSOCIATES			
telephone number, and if available, a DX number and Exchange, for		ucks green	ROAD, SHIR	LEY, SOLIHULL, WEST
the person Companies House should contact of there is a query	B90 2EL, ENGLAND	Tel 01	21 693 500	0
	DX number	DX exch	ange	



### List of past and present shareholders Schedule to form 363a

**CHFP036** 

Company Number	53798
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#### Company Name in full

ADVANCED	VEHICLE	CONTRACTS	LIMITED	

- Changes to shareholders particulars or details of the amount of stock or shares transferred must be completed each year
- You must provide a "full list" of all the shareholders on:
  - The company's first annual return following incorporation;
  - Every third annual return after a full list has been provided
- List the company shareholders in alphabetical order or provide an index
- ➤ List joint shareholders consecutively

	Class and	Shares or amount of stock transferred (if appropriate)		
Shareholders' details	number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer	
Name	ORDINARY 60			
MR STEPHEN DENIS HUSSEY	_			
Address				
FLAT 2, 33 RUSSELL TERRACE	_			
LEAMINGTON SPA	_			
WARWICKSHIRE	_		ļ	
UK Postcode C V 3 1 L 1 E				
Name	ORDINARY			
MR MICHAEL ANTHONY QUINN	_		į	
Address				
3 THE COURTYARD, BRIDGE END	_			
WARWICK	_		ļ	
WARWICKSHIRE	-			
UK Postcode LC LV L3 L4 L L6 LP				
Name				
[ L	<b>-</b> -			
Address				
	_	{	}	
	_	}		
UK Postcode LLLLLL	_			

## List of past and present shareholders (Continued)

Company Number 4063798

	Class and	Shares or amount of stock transferred			
Shareholders' details	number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer		
Name					
L					
Address					
L					
L					
UK Postcode LLLLLL					
Name			_		
1					
Address					
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<u> </u>					
UK Postcode LLLLL					
Name					
Address					
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UK Postcode LLLLLL			**		
Name					
<u> </u>			1		
Address					
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LIVE DO NOT THE REAL PROPERTY OF THE PROPERTY					
UK Postcode LLLLLL					
Name					
Address					
Address	,				
L					