



Companies House

— for the record —

Company Name

**F.M. INSURANCE COMPANY
LIMITED**

Company Type

**Private Company Limited By
Shares**

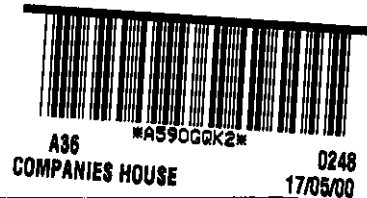
Company Number

755780

Information extracted from
Companies House records on
3rd May 2000

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: 755780/03/10

| | Current details | Amended details | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|--|-------------|-------------|---------------------------|--|--|--|--|--|--|--|--|--|--|--|--|---|----------|-------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| > Registered Office Address <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> | 1 Windsor Dials Arthur Road Windsor Berkshire SL4 1RS | Address _____ _____ _____ UK Postcode _ _ _ _ _ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| > Register of Members <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> | Address where the Register is held At Registered Office | Address _____ _____ _____ UK Postcode _ _ _ _ _ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| > Register of Debenture Holders <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> | Not Applicable | Address _____ _____ _____ UK Postcode _ _ _ _ _ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| > Principal Business Activities <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> | <table border="1"> <thead> <tr> <th>SIC Code</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>6603</td> <td>Non-life insurance</td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table> | SIC Code | Description | 6603 | Non-life insurance | | | | | | | | | | | | | <table border="1"> <thead> <tr> <th>SIC CODE</th> <th>Description</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table> | SIC CODE | Description | | | | | | | | | | | | | | |
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| 6603 | Non-life insurance | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| SIC CODE | Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| > If no entries are shown, please enter principal activity code(s) in "Amended details" column. See notes for guidance for list of activity codes. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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14/29/01*

Section 2: Details of Officers of the Company

| | 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 Eileen Margaret LATTIMER Address Oxford Cottage 34 Nursery Lane Ascot Berkshire SL5 8PY | Name Address UK Postcode _ _ _ _ _ Date of change _ _ / _ _ / _ _ _ _ Date Eileen Margaret LATTIMER 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 James William BLACK Address 420 E Ohio No 6F Chicago Illinois Usa IL 60611 Date of birth 12/05/1939 Nationality Us Citizen Occupation Insurance Co.Executive | Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date James William BLACK 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 Kenneth William DAVEY Address Sheringham House Ellwood Road Beaconsfield Buckinghamshire HP9 1EN Date of birth 03/07/1951 Nationality Irish Occupation Ins.Co.Exec. | Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Kenneth William DAVEY 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.

Particulars of a new Director must be notified on form 288.

Current details

Name
Shivan Sivaswamy
SUBRAMANIAM

Address
14 Rose Court
Providence Ri 02906
Usa

Date of birth 15/02/1949

Nationality Us Citizen

Occupation Insurance Company
Executive

Amended details

Name

Address

UK Postcode _ _ _ _ _

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

Nationality _____

Occupation _____

Date of change _ _ / _ _ / _ _ _ _

Date Shivan Sivaswamy
 SUBRAMANIAM ceased to be director (if
 applicable) _ _ / _ _ / _ _ _ _

Section 3: Share Capital

| | 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 35,148,148 Aggregate Nominal Value of issued shares £35,148,148.00 | 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 35,148,148 Total Nominal value of shares issued £35,148,148.00 | 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 029 2038 0801.**

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 |
|---|--|--|
| <p>> Shareholder Name ALLEDALE MUTUAL INSURANCE C</p> <p>Address 1301 Atwood Avenue Allendale Park Po Box 7500 Johnston Rhode Island 12919 United States Of America</p> <p>Shares held Class Ordinary</p> <p>Number 12600000 10,000,000</p> | <p>Name <u>SEE ATTACHED LETTER</u></p> <p>Address _____</p> <p>UK Postcode _ _ _ _ _</p> <p>Shares held Class Number</p> | <p>Shares transferred by ALLEDALE MUTUAL INSURANCE CO.</p> <p>Class Ordinary</p> <p>Number 10,000,000</p> <p>Date of transfer 14/07/1999</p> |
| <p>> Shareholder Name ARKWRIGHT MUTUAL INSURANCE C</p> <p>Address 225 Wyman Street Waltham Massachusetts 02254 United States Of America</p> <p>Shares held Class Ordinary</p> <p>Number 9300000 10,000,000</p> | <p>Name _____</p> <p>Address _____</p> <p>UK Postcode _ _ _ _ _</p> <p>Shares held Class Number</p> | <p>Shares transferred by ARKWRIGHT MUTUAL INSURANCE CO.</p> <p>Class Ordinary</p> <p>Number 10,000,000</p> <p>Date of transfer 14/07/1999</p> |
| <p>> Shareholder Name FACTORY MUTUAL INSURANCE CO.</p> <p>Address 1301 Atwood Avenue Allendale Park Po Box 7500 Johnston Rhode Island 12919 United States Of America</p> <p>Shares held Class Ordinary</p> <p>Number 5148148</p> | <p>Name _____</p> <p>Address _____</p> <p>UK Postcode _ _ _ _ _</p> <p>Shares held Class Number</p> | <p>Shares transferred by FACTORY MUTUAL INSURANCE CO.</p> <p>Class _____</p> <p>Number _____</p> <p>Date of transfer _/_/_/____</p> |

| Current details | | Amended details | | Shares transferred | |
|--|--|---|--|---|--|
| > Shareholder Name PROTECTION MUTUAL INSURANCE | | Name <hr/> | | Shares transferred by PROTECTION MUTUAL INSURANCE CO. | |
| Address 300 S. Northwest Highway Park Ridge Illinois 62068 United States Of America | | Address <hr/> <hr/> <hr/> | | | |
| | | UK Postcode _ _ _ _ _ | | | |
| Shares held Class Ordinary | | Shares held Class <hr/> <hr/> | | | |
| Number 8100000 10,000,000. | | Number <hr/> <hr/> | | Class Number Date of transfer Ordinary 10,000,000 14/07/1999. <hr/> <hr/> | |

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 _ _ _ _ _ | | | |
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| 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 tick 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 Green Lattimer.

(Director / Secretary)

Date 12, 05, 2000.
_ _ / _ _ / _ _ _ _

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

What to do now

Please detach and retain the covering letter, 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 17/5/2000 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 **17th May 2001** 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

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

Cheque ☒ Postal Order ☐ Cheque / Postal Order
Number _____

(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

E LATTIMER

Telephone number inc code

01753 750111

Address

1 Windsor Drals
Windsor.

DX number if applicable

_ _ _ _ _

DX exchange

Postcode

SL4 1RS.