



260493/90

363a

Please complete in typescript, or in bold black capitals.

Annual Return

CHFP029

Company Number 1451456

Company Name in full Willis Group Services Limited

Date of this return

The information in this return is made up to

Day Month Year
01 / 05 / 2003

Date of next return

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 / 2004

Registered Office

Show here the address at the date of this return.

TEN TRINITY SQUARE

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

Post town LONDON

County / Region _____

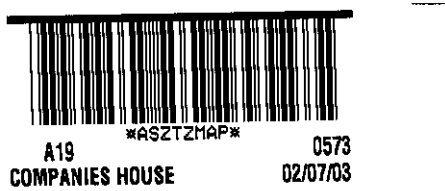
UK Postcode E C 3 P 3 A X

Principal business activities

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

7484

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, CF14 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 members

If the register of members is not kept at the registered office, state here where it is kept.

Post town

County / Region

UK Postcode

Register of Debenture holders

If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state here where it is kept.

Post town

County / Region

UK Postcode

Company type

Public limited company

Private company limited by shares

Private company limited by guarantee without share capital

Private company limited by shares exempt under section 30

Private company limited by guarantee exempt under section 30

Private unlimited company with share capital

Private unlimited company without share capital

Please tick the appropriate box

Company Secretary

(Please photocopy this area to provide details of joint secretaries).

Details of a new company secretary must be notified on form 288a.

Name

* Style / Title

* Voluntary details.

Forename(s)

TRACY MARINA

If a partnership give the names and addresses of the partners or the name of the partnership and office address.

Surname(s)

WARREN

Address

THE MOLEHILL

HOLLOW ROAD, MOLEHILL GREEN

Usual residential address must be given. In the case of a corporation, or a Scottish firm, give the registered or principal office address.

Post town

NR FELSTED, DUNMOW

County / Region

ESSEX

UK Postcode

C M 6 3 J F

Country

Directors

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

Name * Style / Title _____

Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.

Date of birth Day Month Year
1 4 / 0 3 / 1 9 5 1

Forename(s) MICHAEL PATRICK

Surname CHITTY

Address 17 ESKDALE ROAD

Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.

Post town BEXLEYHEATH

County / Region KENT UK Postcode D A 7 5 D L

Country ENGLAND Nationality BRITISH

Business occupation CHARTERED SECRETARY

* Voluntary details.

Name * Style / Title _____

Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.

Date of birth Day Month Year
2 1 / 0 6 / 1 9 5 8

Forename(s) THOMAS

Surname COLRAINE

Address FLAT 1, THE ICON BUILDING

Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.

Post town LONDON

County / Region UK Postcode S W 1 V 3 J Y

Country ENGLAND Nationality BRITISH

Business occupation CHARTERED ACCOUNTANT

Directors

Details of new directors must be notified on form 288a

Please list directors in alphabetical order.

Name * Style / Title _____

Day Month Year

Date of birth 2 5 / 0 9 / 1 9 6 0

Forename(s) MICHAEL

Surname WRIGHT

Address 9 ST LEONARDS ROAD

EALING

Post town LONDON

County / Region _____ UK Postcode W 1 3 _____ 8 P N

Country ENGLAND Nationality BRITISH

Business occupation SYSTEMS DIRECTOR

Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.

* Voluntary details.

Name * Style / Title _____

Day Month Year

Date of birth _____ / _____ / _____

Forename(s) _____

Surname _____

Address _____

Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.

Post town _____

County / Region _____ UK Postcode _____

Country _____

Nationality _____

Business occupation _____

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

Class <i>(e.g. Ordinary/Preference)</i>	Number of shares issued	Aggregate Nominal Value <i>(i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)</i>
ORD £1.00	5,000,000	£ 5,000,000.00
Totals	5,000,000	£ 5,000,000.00

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 returns.

There were no changes in the period

on paper in another format

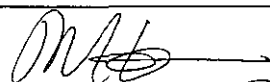
A list of changes is enclosed

A full list of shareholders is enclosed

Certificate

I certify that the information given in this return is true to the best of my knowledge and belief.

Signed

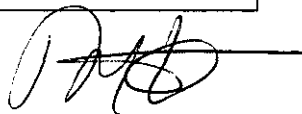


Date

16/5/2003

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 includes

(enter number)

continuation 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.

MISS T M WARREN, TEN TRINITY SQUARE, LONDON, EC3P 3AX

Tel 020 7481 7004

DX number

DX exchange



List of past and present shareholders
Schedule to form 363a

CHFP029

Company Number 1451456

Company Name in full Willis Group Services 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 company 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

Shareholders' details	Class and number of shares or amount of stock held	Shares or amount of stock transferred (if appropriate)	Class and number of shares or amount of stock transferred	Date of registration of transfer
Name <u>WILLIS FABER LIMITED</u> Address <u>TEN TRINITY SQUARE, LONDON</u> UK Postcode <u>E C 3 P 3 A X</u>	Ord £1.00 4,999,999			
Name <u>WILLIS LIMITED AND WILLIS GROUP LIMITED</u> Address <u>TEN TRINITY SQUARE, LONDON</u> UK Postcode <u>E C 3 P 3 A X</u>	Ord £1.00 1			
Name Address UK Postcode <u>LL LL L LL L</u>				