

Edgar Filing: EBIX COM INC - Form 3

EBIX COM INC
Form 3
May 07, 2001

FORM 3

OMB APPROVAL

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person*			2. Date of Event Requiring Statement (Month/Day/Year)	4. Issuer Name and Ticker on
BRiT Insurance Holdings Plc			April 27, 2001	ebix.com, Inc. ("EBIX")
(Last)	(First)	(Middle)	3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary) N/A (non-U.S. Company)	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) / / Director /X/ 10% O / / Officer (give / / Other title below) below
55 Bishopsgate				
(Street)				

London EC2N 3AS United Kingdom

(City) (State) (Zip)

TABLE 1 NON-DERIVATIVE S

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Natu (Ins
Common Stock, \$.10 par value	2,248,300	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly by the reporting person.
*If the form is filed by more than one reporting person, SEE Instruction 5(b)(v).
POTENTIAL PERSONS
COLLECTION OF INFORMATION
NOT REQUIRED TO REPORT
A CURRENTLY VALID

FORM 3 (CONTINUED) TABLE II DERIVATIVE SECURITIES BENEFICIALLY OWNED (E.G., PUTS, CALLS, WARRANTS)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security
	Date Exercisable Expiration Date	Title	Amount or Number of Shares

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Explanation of Responses:

May 7, 2001

**Signature of Reporting Person

Date

/s/ Neil Eckert, Director

/s/ Matthew Scales, Director

*If the form is filed by more than one reporting person, SEE Instruction 5(b) (v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. SEE 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, SEE Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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