

Please complete in typescript,  
or in bold black capitals.

**Annual Return**

000362/15

CHFP010

**Company Number**

339181

**Company Name in full**

THE BRITISH DIABETIC ASSOCIATION

**Date of this return**

The information in this return is made up  
to

Day		Month		Year		
2	6	0	7	2	0	0
						3

**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		

**Registered Office**

Show here the address at the date of  
this return.

10 PARKWAY

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

Post town

LONDON

County / Region

UK Postcode

NW1 7AA

**Principal business activities**

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

9133

If the code number cannot be determined,  
give a brief description of principal  
activity.



A16  
COMPANIES HOUSE

0056  
26/09/03

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 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

<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Please tick the appropriate box

**Company Secretary**

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

\* Voluntary details.

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

**Name**

\* Style / Title

Mr

Forename(s)

PATRICK RUPERT COOPER

Surname

STEWART

**Address**

FLAT 3, 137 WEST END LANE

Post town

LONDON

County / Region

UK Postcode

NW6 2PH

Country

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

**Directors**

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

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

Name

\* Style / Title

Dr

Day Month Year

Date of birth

1 8 0 6 1 9 4 7

Forename(s)

ANDREW CHARLES

Surname

BURDEN

Address

17 WESTMINSTER ROAD

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

Post town

LEICESTER

County / Region

LEICESTERSHIRE

UK Postcode

LE2 2EH

Country

Nationality

BRITISH

Business occupation

PHYSICIAN

\* Voluntary details.

Name

\* Style / Title

Day Month Year

Date of birth

0 7 0 5 1 9 2 8

Forename(s)

Ramakant Shripad

Surname

Anaokar

Address

5 Holcombe Road

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

Post town

Ilford

County / Region

Essex

UK Postcode

IG1 4XF

Country

Nationality

British

Business occupation

Retired

**Directors***Please list directors in alphabetical order.***Details of new directors must be notified on form 288a**

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

Name \* Style / Title \_\_\_\_\_

Day Month Year  
Date of birth 2 1 0 4 1 9 7 9

Forename(s) Alison Louise

Surname Finney

Address 1 Lower Road

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

Post town Chinnor

County / Region Oxfordshire UK Postcode OX39 4DT

Country \_\_\_\_\_ Nationality British

**Business occupation** Health

\* Voluntary details.

Name \* Style / Title \_\_\_\_\_

Day Month Year  
Date of birth 2 3 0 7 1 9 7 0

Forename(s) Peter

Surname Gibson

Address 72 Carnvue Road, Carmoeny

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

Post town Newtownabbey

County / Region \_\_\_\_\_ UK Postcode BT36 6RQ

Country Ireland Nationality British

**Business occupation** Territory Manager

**Directors**

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

<p><b>Directors</b> In the case of a director that is a corporate or a Scottish firm, the name is the corporate or firm name.</p> <p><b>Usual residential address</b> must be given. In the case of a corporation, give the registered or principal office address.</p>	<p><b>Name</b> * Style / Title _____</p> <p><b>Date of birth</b> _____</p> <p><b>Forename(s)</b> _____</p> <p><b>Surname</b> _____</p> <p><b>Address</b> _____</p> <p><b>Post town</b> _____</p> <p><b>County / Region</b> _____ <b>UK Postcode</b> _____</p> <p><b>Country</b> _____ <b>Nationality</b> _____</p> <p><b>Business occupation</b> _____</p>
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\* Voluntary details.

<p><b>Directors</b> In the case of a director that is a corporate or a Scottish firm, the name is the corporate or firm name.</p> <p><b>Usual residential address</b> must be given. In the case of a corporation, give the registered or principal office address.</p>	<p><b>Name</b> * Style / Title _____</p> <p><b>Date of birth</b> _____</p> <p><b>Forename(s)</b> _____</p> <p><b>Surname</b> _____</p> <p><b>Address</b> _____</p> <p><b>Post town</b> _____</p> <p><b>County / Region</b> _____ <b>UK Postcode</b> _____</p> <p><b>Country</b> _____ <b>Nationality</b> _____</p> <p><b>Business occupation</b> _____</p>
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**Directors**

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

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

Name \* Style / Title \_\_\_\_\_

Day Month Year  
Date of birth 2 5 0 5 1 9 5 5

Forename(s) Helen \_\_\_\_\_

Surname Husband \_\_\_\_\_

Address 11 Heol Isaf, Radyr \_\_\_\_\_

Post town Cardiff \_\_\_\_\_

County / Region South Glamorgan UK Postcode CF4 8AF

Country \_\_\_\_\_ Nationality English \_\_\_\_\_

Business occupation Diabetes Facilitator \_\_\_\_\_

\* Voluntary details.

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

Name \* Style / Title \_\_\_\_\_

Day Month Year  
Date of birth 2 2 0 9 1 9 4 7

Forename(s) David Richard \_\_\_\_\_

Surname Matthews \_\_\_\_\_

Address 18 Norreys Road, Cumnor \_\_\_\_\_

Post town Oxford \_\_\_\_\_

County / Region Oxfordshire UK Postcode OX2 9PT

Country \_\_\_\_\_ Nationality British \_\_\_\_\_

Business occupation Physician \_\_\_\_\_

**Directors**

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

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

<b>Name</b>	* Style / Title	Mrs		
		Day	Month	Year
	Date of birth	2	6	0 7 1 9 3 4
	Forename(s)	MARGARET MARY		
	Surname	HUNTER		
<b>Address</b>	214 PRINCE CONSORT ROAD			
	Post town	GATESHEAD		
	County / Region	TYNE & WEAR	UK Postcode	NE8 4DX
	Country		Nationality	BRITISH
	<b>Business occupation</b>	POST OFFICE CLERK		

\* Voluntary details.

<b>Name</b>	* Style / Title	Sir		
		Day	Month	Year
	Date of birth	0	2	0 1 1 9 4 6
	Forename(s)	MICHAEL WILLIAM		
	Surname	HIRST		
<b>Address</b>	GLENTIRAN			
	Post town	KIPPEN		
	County / Region	STIRLINGSHIRE	UK Postcode	FK8 3JA
	Country	SCOTLAND	Nationality	BRITISH
	<b>Business occupation</b>	CHARTERED ACCOUNTANT		

**Directors**

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

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

Name \* Style / Title | Dr

Day Month Year

Date of birth | 2 | 0 | 0 | 1 | 1 | 9 | 6 | 0

Forename(s) | Navnit Kaur

Surname | Pall

Address | 67 Wellington Road

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

Post town | Edgbaston

County / Region | UK Postcode | B15 2ET

Country | Nationality | British

Business occupation | GP

\* Voluntary details.

Name \* Style / Title |

Day Month Year

Date of birth | 1 | 9 | 1 | 2 | 1 | 9 | 4 | 3

Forename(s) | Brian John

Surname | Wootten

Address | 16 Brutus Close, Castle Park

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

Post town | Dorchester

County / Region | Dorset UK Postcode | DT1 2TJ

Country | Nationality | British

Business occupation | Civil Servant

**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)

Company limited by Guarantee with no share capital		
<b>Totals</b>		

**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**

P R Stewart

**Date**

2/9/03

† 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  continuation sheets.  
(enter number)

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.

The Clock House, 140 London Road, Guildford, Surrey,

GU1 1UW

Tel

DX number

DX exchange