



Companies House

**AR01** (ef)

**Annual Return**



Received for filing in Electronic Format on the: 06/01/2016

X4Y1ZDG0

*Company Name:* Mobbs Memorial Trust Limited

*Company Number:* 00571785

*Date of this return:* 29/12/2015

*SIC codes:* 88990

*Company Type:* Private company limited by guarantee

*Situation of Registered Office:* VICTORIA HOUSE 26 QUEEN VICTORIA STREET  
READING  
BERKSHIRE  
UNITED KINGDOM  
RG1 1TG

**Officers of the company**

*Company Director*    **1**

*Type:*                      **Person**

*Full forename(s):*        **MRS SANDRA JANE**

*Surname:*                **GREENSLADE**

*Former names:*

*Service Address:*        **WOOD EDGE COTTAGE BOLNEY ROAD  
SHIPLAKE  
OXFORDSHIRE  
UNITED KINGDOM  
RG9 3NT**

*Country/State Usually Resident:*    **UNITED KINGDOM**

*Date of Birth:*    **\*\*/01/1960**                      *Nationality:*    **BRITISH**

*Occupation:*    **COMPANY DIRECTOR**

*Company Director* 2

*Type:* **Person**  
*Full forename(s):* **MR CHRISTOPHER WILLIAM**

*Surname:* **MOBBS**

*Former names:*

*Service Address:* **WEIR FARM LOWER ROAD BLACKTHORN  
BICESTER  
OXFORDSHIRE  
UNITED KINGDOM  
OX25 1TG**

*Country/State Usually Resident:* **UNITED KINGDOM**

*Date of Birth:* **\*\*/11/1965** *Nationality:* **BRITISH**  
*Occupation:* **MANAGER**

---

*Company Director*    **3**

*Type:*                                **Person**

*Full forename(s):*                **DR CHARLES NOEL ARKLESS**

*Surname:*                           **MOBBS**

*Former names:*

*Service Address:*                **CYPRESS COTTAGE 89ST.JOHNS ROAD  
NEWPORT  
ISLE OF WIGHT  
UNITED KINGDOM  
PO30 1LS**

*Country/State Usually Resident:*   **UNITED KINGDOM**

*Date of Birth:*   **\*\*/10/1944**                                *Nationality:*   **BRITISH**

*Occupation:*    **MEDICAL PRACTITIONER**

*Company Director* 4

*Type:* **Person**  
*Full forename(s):* **MR ALEXANDER NOEL PETER**

*Surname:* **MOBBS**

*Former names:*

*Service Address:* **71A GAISFORD STREET  
LONDON  
UNITED KINGDOM  
NW5 2EE**

*Country/State Usually Resident:* **UNITED KINGDOM**

*Date of Birth:* **\*\*/12/1976** *Nationality:* **BRITISH**  
*Occupation:* **MUSICIAN/TEACHER**

*Authorisation*

*Authenticated*

*This form was authorised by one of the following:*

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor.