



Companies House

— for the record —

Company Name

THE FELLOWSHIP OF
POSTGRADUATE MEDICINE

Company Type

Private Company Limited By
Guarantee Without Share Capital

Company Number

721213

Information extracted from
Companies House records on
5th June 2005

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. ✓



A29
COMPANIES HOUSE

ATDGD75L

0728
21/07/05

Section 1: Company details

Ref: 721213/15/42

	Current details	Amended details																
<p>> Registered Office Address</p> <p><i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i></p>	<p>12 Chandos Street London W1G 9DR</p>	<p>Address</p> <p><u>12 CHANDOS STREET</u> <u>CAVENDISH SQUARE</u> <u>LONDON</u></p> <p>UK Postcode <u>W1G 9DR</u></p>																
<p>> Register of Members</p> <p><i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i></p>	<p>Address where the Register is held At Registered Office</p>	<p>Address</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>UK Postcode _ _ _ _ _</p>																
<p>> Register of Debenture Holders</p> <p><i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i></p>	<p>Not Applicable</p>	<p>Address</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>UK Postcode _ _ _ _ _</p>																
<p>> Principal Business Activities</p> <p><i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i></p>	<table border="1"> <thead> <tr> <th>SIC Code</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>7487</td> <td>Other business activities</td> </tr> </tbody> </table>	SIC Code	Description	7487	Other business activities	<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> </tbody> </table>	SIC CODE	Description	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
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<p>> Please enter additional principal activity code(s) in "Amended details" column. See notes for guidance for list of activity codes.</p>																		

Section 2: Details of Officers of the Company

	Current details	Amended details
<p>> Company Secretary If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</p> <p>Particulars of a new Company Secretary must be notified on form 288a.</p>	<p>Name Professor Alimuddin ZUMLA MBCHB MSC PHD FRCP LON FRCP EDIN</p> <p>Address Flat 6 Hamilton House 81 Southampton Row London WC1B 4HA</p>	<p>Name</p> <p><input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.</p> <p>Address</p> <p>UK Postcode _ _ _ _ _</p> <p>Date of change _ _ / _ _ / _ _ _ _</p> <p>Date Professor Alimuddin ZUMLA MBCHB MSC PHD FRCP LON FRCP EDIN _ _ / _ _ / _ _ _ _</p> <p>ceased to be secretary (if applicable)</p>
<p>> 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.</p> <p>Particulars of a new Director must be notified on form 288a.</p>	<p>Name Professor Peter John BARNES MA DM DSC FRCP</p> <p>Address 44 Woodsome Road London NW5 1RZ</p> <p>Date of birth 29/10/1946</p> <p>Nationality British</p> <p>Occupation Medical Practitioner</p>	<p>Name</p> <p><input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.</p> <p>Address</p> <p>UK Postcode _ _ _ _ _</p> <p>Date of birth _ _ / _ _ / _ _ _ _</p> <p>Nationality _ _ _ _ _</p> <p>Occupation _ _ _ _ _</p> <p>Date of change _ _ / _ _ / _ _ _ _</p> <p>Date Professor Peter John BARNES MA DM DSC FRCP ceased to be director (if applicable) _ _ / _ _ / _ _ _ _</p>

	Current details	Amended details
> 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 288a.	Name Dr Jeremy Shaw BOLTON MA MB FRC PSYCH Address 4 Brooklands Park Blackheath London SE3 9BL Date of birth 10/11/1943 Nationality British Occupation Medifal Practitioner	Name <input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Address UK Postcode _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation <u>Medical Practitioner</u> Date of change <u>20, 07, 2005</u> Date Dr Jeremy Shaw BOLTON MA MB FRC PSYCH 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 288a.	Name Dr Douglas John COLTART Address 47 Weymouth Street London W1G 8NE Date of birth 07/10/1943 Nationality British Occupation Consultant Cardiologist	Name <u>MD FRCP FACC</u> <input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Address <u>47 WEYMOUTH STREET</u> <u>LONDON</u> UK Postcode <u>W1G 8NB</u> Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change <u>20, 07, 2005</u> Date Dr Douglas John COLTART ceased to be director (if applicable) _ _ / _ _ / _ _ _ _

	Current details	Amended details
> 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 288a.</i>	Name Dr Gordon Charles COOK MD DSC FRCP/FRACP FLS Address 11 Old London Road St Albans Hertfordshire AL1 1QE Date of birth 17/02/1932 Nationality British Occupation Hon President Chairman	Name L FRCP E <input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change 20, 07, 2005 Date Dr Gordon Charles COOK MD DSC FRCP FRACP FLS 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 288a.</i>	Name Doctor George Osborne COWAN GOC OBE FRCP FRCP E FRCP I Address Kilrymont Gorse Way, Hartley Longfield Kent DA3 8AF Date of birth 05/09/1939 Nationality British Occupation Physician	Name OBE FRCP FRCP E FRCP I FRCP G <input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change 20, 07, 2005 Date Doctor George Osborne COWAN GOC OBE FRCP FRCP E FRCP I ceased to be director (if applicable) _ _

	Current details	Amended details
<p>> Director</p> <p>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</p> <p>Particulars of a new Director must be notified on form 288a.</p>	<p>Name Doctor Alasdair David MALCOLM</p> <p>Address Lake House Copthorne Road Felbridge East Grinstead West Sussex RH19 2QQ</p> <p>Date of birth 10/07/1945</p> <p>Nationality British</p> <p>Occupation Physician</p>	<p>Name DR ALASDAIR DAVID MALCOLM MD FRCP FFPM</p> <p><input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.</p> <p>Address _____ _____ _____</p> <p>UK Postcode _____</p> <p>Date of birth ____ / ____ / ____</p> <p>Nationality _____</p> <p>Occupation _____</p> <p>Date of change 20, 07, 2005</p> <p>Date Doctor Alasdair David MALCOLM ceased to be director (if applicable) ____ / ____ / ____</p>
<p>> Director</p> <p>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</p> <p>Particulars of a new Director must be notified on form 288a.</p>	<p>Name Dr John Francis MAYBERRY DSC MD FRCP</p> <p>Address Cariat House The Spinney Thurnby Leicester Leicestershire LE7 9QS</p> <p>Date of birth 15/08/1951</p> <p>Nationality British</p> <p>Occupation Physician</p>	<p>Name MD DSC FRCP</p> <p><input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.</p> <p>Address _____ _____ _____</p> <p>UK Postcode _____</p> <p>Date of birth ____ / ____ / ____</p> <p>Nationality _____</p> <p>Occupation _____</p> <p>Date of change 20, 07, 2005</p> <p>Date Dr John Francis MAYBERRY DSC MD FRCP ceased to be director (if applicable) ____ / ____ / ____</p>

Amended details

Name _____

Doctor David John Richard
MORGAN MB BS FRCP

**Links Cottage
Holders Hill Crescent
London
NW4 1NE**

Date of birth 21/06/1952

Nationality British

Occupation Consultant Physician

Name _____

Dr

☐ Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.

Address

UK Postcode _ _ _ _ _ _ _ _

Date of birth / /

Nationality _____

Occupation _____

Date of change 20, 03, 2005

Date Doctor David John Richard
MORGAN MB BS FRCP ceased to be
director (if applicable) / /

Name _____

Name
Dr Lotte Therese NEWMAN CBE
FRCGP FRNZCGP

**The White House 1 Ardwick Road
Hampstead
London
NW2 2BX**

Date of birth 22/01/1929

Nationality British

Occupation Medical Practitioner

Name _____

☐ Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.

Address

UK Postcode _ _ _ _ _ _ _ _

Date of birth / /

Nationality _____

Occupation _____

Date of change / /

Date Dr Lotte Therese NEWMAN CBE
FRCGP FRNZCGP ceased to be director
(if applicable) / / /

Amended details

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
288a.*

Name
Dr Michael William Newbery
NICHOLLS FRC PATH

Address
Creekside Green Acres
Birdham
Chichester
West Sussex
PO20 7HL

Date of birth 22/05/1931

Nationality British

Occupation Hon Treasurer

Name

☐ Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.

Address

UK Postcode _ _ _ _ _ _ _

Date of birth / /

Nationality _____

Occupation _____

Date of change / /

Date Dr Michael William Newbery
NICHOLLS FRC PATH ceased to be
director (if applicable), / /

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 288a.

Name
Professor Donald Robert James
SINGER BMED BIOL MD FRCP

Address
37 Newbold Terrace East
Leamington Spa
Warwickshire
CV32 4EY

Date of birth 20/08/1954

Nationality British

Occupation	Doctor
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Name

☐ Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.

Address

UK Postcode _ _ _ _ _ _ _

Date of birth / /

Nationality _____

Occupation _____

Date of change / /

Date Professor Donald Robert James
SINGER BMED BIOL MD FRCP 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 288a.

Current details

Name

Professor Alimuddin ZUMLA
MBCHB MSC PHD FRCP LON FRCP
EDIN

Address

Flat 6 Hamilton House
81 Southampton Row
London
WC1B 4HA

Date of birth 15/05/1955

Nationality British

Occupation Professor Of Medicine

Amended details

Name

☐ Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.

Address

UK Postcode _ _ _ _ _

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

Nationality _ _ _ _ _

Occupation _ _ _ _ _

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

Date Professor Alimuddin ZUMLA
MBCHB MSC PHD FRCP LON FRCP
EDIN ceased to be director (if applicable)



Companies House

— for the record —

363s Annual Return Declaration

- > When you have checked all the sections of this form, please complete this page 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 £30.

Signature

[Handwritten Signature]
 (Director/Secretary)

Date

20, 07, 2005

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

What to do now

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 1/7/2005
- 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 1st July 2006
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

OR

For members of the Hays Document
Exchange service
DX 33050 Cardiff

[Handwritten checkmark] Have you enclosed the filing fee with the company number written on the
reverse of the cheque?

Contact Address

You do not have to give any contact information below, but if you do, it will help
Companies House to contact you if there is a query on the form. The contact
information that you give will be visible to searchers of the public record.

Contact Name

Mrs Sandra L. JOHNSON
(ADMINISTRATOR)

Telephone number inc code

020 7 636 6334

Address

FELLOWSHIP OF POSTGRADUATE
MEDICINE

DX number if applicable

_ _ _ _ _

DX exchange

12 GANDOS STREET
CAVENDISH SQUARE, LONDON

Postcode

W1G 9DR