



Companies House

AR01 (ef)

Annual Return



Received for filing in Electronic Format on the: **20/01/2014**

X2ZZFNY8

Company Name: **CYRENIANS CYMRU CYF**

Company Number: **01171209**

Date of this return: **31/12/2013**

SIC codes: **86900**
55900
78109
85590

Company Type: **Private company limited by guarantee**

Situation of Registered Office: **124-5 WALTER ROAD**
SWANSEA
WALES
SA1 5RF

Officers of the company

Company Director ***1***

Type: **Person**

Full forename(s): **MR CARL**

Surname: **CHAPPLE**

Former names:

Service Address: **3 BELLE VIEW TERRACE
BARRY
SOUTH GLAMORGAN
CF63 2JQ**

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

Date of Birth: **20/03/1968**

Nationality: **BRITISH**

Occupation: **ARTIST**

Company Director **2**

Type: **Person**
Full forename(s): **MS JANE**

Surname: **MILLER**

Former names:

Service Address: **6 SEYMOUR STREET**
 CARDIFF
 CF24 2NQ

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

Date of Birth: **29/01/1966** *Nationality:* **BRITISH**
Occupation: **GOVERNMENT WORKER**

Company Director **3**

Type: **Person**

Full forename(s): **LESLEY**

Surname: **PENN**

Former names:

Service Address recorded as Company's registered office

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

Date of Birth: **31/10/1948**

Nationality: **BRITISH**

Occupation: **GWALIA**

Company Director 4

Type: **Person**

Full forename(s): **MARK**

Surname: **SHERIDAN**

Former names:

Service Address: **TAI TROTHWY
10-13 THE KINGSWAY
SWANSEA
WEST GLAMORGAN
SA1 5JN**

Country/State Usually Resident: **GREAT BRITAIN**

Date of Birth: **17/12/1955** *Nationality:* **BRITISH**

Occupation: **COMMUNITY CARE DIRECTOR**

Company Director **5**

Type: **Person**

Full forename(s): **MRS JUDITH**

Surname: **TOMLINSON**

Former names:

Service Address: **15 SOUTHWARD LANE
LANGLAND
SWANSEA
SA3 4QE**

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

Date of Birth: **21/09/1959** *Nationality:* **BRITISH**

Occupation: **NHS**

Company Director **6**

Type: **Person**
Full forename(s): **MRS MICHELLE WINIFRED**

Surname: **WALES**

Former names:

Service Address: **3 PARK TERRACE
PONTARDDULAI
SWANSEA
SA4 8HS**

Country/State Usually Resident: **WALES**

Date of Birth: **02/02/1956** *Nationality:* **BRITISH**
Occupation: **DEVELOPEMENT WORKER**

Authorisation

Authenticated

This form was authorised by one of the following:

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