



COMPANIES HOUSE



363b

Please return to

THE REGISTRAR OF COMPANIES  
COMPANIES HOUSE  
CROWN WAY  
CARDIFF  
CF4 3UZ

## Annual Return

of company number **CN** 1392004 **V**

company name  
THE SOCIETY OF HOMOEOPATHS LIMITED

This form should be completed in black.

### Date of this return (See note 1)

The information in this return should be made up to a date not later than

If you are making the return up to an earlier date please show the date here.

### Date of next return (See note 2)

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
DA	05	05	94

05	04	94
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DB			
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### Registered Office (See note 3)

This is the address registered by Companies House as at 14/04/94

2, ARTIZAN ROAD  
NORTHAMPTON  
NN1 4HU.

Use this space to notify a change of registered office address.

**RO** \_\_\_\_\_

Post Town \_\_\_\_\_

County/Region \_\_\_\_\_

Postcode \_\_\_\_\_

### Principal business activities

(See note 4)

Show trade classification code number for principal activity or activities.

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

PA	8	7	9	7
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**Register of members**

(See note 5)

If the register of members is not kept at the registered office, state here where it is kept.

**RM**

Post Town

County/Region

Postcode

**Register of Debenture holders**

(See note 6)

If there is a register of debenture holders and it is not kept at the registered office, state here where it is kept.

**RD**

Post Town

County/Region

Postcode

**Company type** (See note 7)

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 . . . . .

**T1****T2****T3****T4****T5** ☒**T6****T7**

Please mark the appropriate box

**Company Secretary** (See note 8)  
(Please photocopy this area to provide details of joint secretaries)Name *Style/Title*

Forenames

Surname

\*Honours etc

Previous forenames

Previous surname

**Address**

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

\* Voluntary details

Details of a new company secretary **must** be notified on form 288.**CS**

MR

JULIAN

CARLYON

**AD**

2 CLEVE VILLAS

BUTTEROW LANE

Post Town

STROUD

County/Region

GLCS

Postcode

GL5 2NA

Country

1392004

**Directors** (continued)

(New entry)

You may photocopy this page to provide details of additional directors.

Details of new directors must be notified on form 288

Name \*Style/Title

Forenames

Surname

\*Honours etc

Previous forenames

Previous surname

## Address

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

Date of birth

Business occupation

Other directorships

CD

MR

ALISTAIR

DEMPSTER

MA(HONS)

AD

6 SOUTH STREET

NETHERTON

Post Town HUDDERSFIELD

County/Region W. YORKS

Postcode HD4 7JQ

Country

Day Month Year

DO

28 05 55

Nationality NA BRITISH

OC

PROFESSIONAL HOMOEOPATH

OD

Name

\*Style/Title

Forenames

Surname

\*Honours etc

Previous forenames

Previous surname

## Address

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

Date of birth

Business occupation

Other directorships

CD

MS

ZOFIA

DYMITER

AD

2 ST HELENS ROAD

DORCHESTER

Post Town

County/Region DORSET

Postcode DT1 1SD

Country

Day Month Year

DO

22 08 52

Nationality NA BRITISH

OC

PROFESSIONAL HOMOEOPATH

OD

\* Voluntary details

Continuation Sheet

1392004

**Directors** (continued)

(See note 8)

Name \*Style/Title

Forenames

Surname

\*Honours etc

Previous forenames

Previous surname

**Address**

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

Date of birth

Business occupation

Other directorships

You may photocopy this page to provide details of additional directors.

Details of new directors must be notified on form 288

CD	MR
	STEPHEN
	GORDON
AD	SCHOOL HOUSE
	MARKET PLACE, KENNINGHAM
	Post Town
	County/Region NORFOLK
	Postcode NR16 2AH
	Country
DO	1 13 0 19 4 9
	Nationality NA BRITISH
OC	PROFESSIONAL HOMOEOPATH
OD	

Name

\*Style/Title

Forenames

Surname

\*Honours etc

Previous forenames

Previous surname

**Address**

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

Date of birth

Business occupation

Other directorships

CD	MR
	PAUL
	LORRIMORE
AD	POUND STABLES, WOOD NOCTON ROAD
	ST IBSHAM
	Post Town FAKENHAM
	County/Region NORFOLK
	Postcode NR21 0EX
	Country
DO	2 10 0 16 5 11
	Nationality NA BRITISH
OC	PROFESSIONAL HOMOEOPATH
OD	

\* Voluntary details

Continuation Sheet

**Directors** (See note 8)

Please list directors in alphabetical order

Name \*Style/Title

Forenames

Surname

\*Honours etc

Previous forenames

Previous surname

**Address**

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

Details of new directors must be completed on form 288

**CD**

MS

CHRISTINE

CONYERS

CHASCOISNE

**AD**

HAGS HILL COTTAGE

KYO BOG LANE

Post Town PRUDHOE

County/Region NORTHUMBERLAND

Postcode NE42 5N

Country

Day Month Year

Date of birth

**DO** 2 10 12 4 19Nationality **NA** BRITISH

Business occupation

**OC**

PROFESSIONAL HOMEOPATH

Other directorships

**OD**

Name

\*Style/Title

Forenames

Surname

\*Honours etc

Previous forenames

Previous surname

**Address**

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

**CD**

MRS

LEBLEY

CARLISLE

**AD**

3 RICHMOND CRESCENT

HIGHAMS PARK

Post Town LONDON

County/Region

Postcode E4 9RT

Country

Day Month Year

Date of birth

**DO** 0 17 0 15 5 14Nationality **NA** BRITISH

Business occupation

**OC**

PROFESSIONAL HOMEOPATH

Other directorships

**OD**

\* Voluntary details

If you have more than two directors please use the continuation sheet provided

**Issued share capital***(See note 9)*

Enter details of all the shares in issue at the date of this return.

Class	Number	Aggregate Nominal Value
<b>Totals</b>		

*Please mark the appropriate box(es)*

There were no changes in the period ☐

A list of changes is enclosed ☐ on paper ☐ not on paper

A full list of members is enclosed ☐ ☐

**List of past and present members** *(See note 10)**(Use attached schedule where appropriate)*

A full list is required if one was not included with either of the last two returns.

The last full members list was at

**Elective resolutions***(See note 11)**(Private companies only)*If an election is in force at the date of this return to dispense with annual general meetings, mark this box. ☐If an election is in force at the date of this return to dispense with laying accounts in general meetings, mark this box. ☐**Certificate**

I certify that the information given in this return is true to the best of my knowledge and belief.

I enclose the fee of £32.

Signed

Mary ClarkeSecretary/Director \*  
*(\* delete as appropriate)*

Date

5.5.94

This return includes

2*(enter number)*

continuation sheets.

To whom should Companies House direct any enquiries about the information shown in this return?

MARY CLARKETHE SOCIETY OF HOBBOPATIKS2 ARTIZAN ROADNORTHAMPTONPostcode NA6 4HU

Telephone

0604 21400

Extension

**Check List**

Have you included

- your principal business activity code?
- dates of birth of all directors?
- a signature of either a director or secretary?
- a members list (if required)?
- a cheque made payable to Companies House?

1392004

**Directors** (continued)

(See note 6)

Name

\*Style/Title

Forenames

Surname

\*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

You may photocopy this page to provide details of additional directors.

Details of new directors must be notified on form 288

**CD** MRS

CHRISTINE

MILLUM

BSc HONS

**AD** FERN HOUSE

HIGH ST

Post Town BARRON ON HUMBER

County/Region HUMBERSIDE

Postcode DN19 7AA

Country

Day Month Year

**DO** 11 05 46Nationality **NA** BRITISH**OC** PROFESSIONAL HOMEOPATH**OD**

Name

\*Style/Title

Forenames

Surname

\*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

\* Voluntary details

**CD** MR

FRANCIS

TREUHERZ

FLAT 2

**AD** 18 THE AVENUE

BRONDESBURY PARK

Post Town LONDON

County/Region

Postcode NW6 7YD

Country

Day Month Year

**DO** 06 12 41Nationality **NA** BRITISH**OC** PROFESSIONAL HOMEOPATH**OD**

Continuation Sheet

1392004

**Directors** (continued)

(See note 8)

Name                      \*Style/Title

Forenames

Surname

\*Honours etc

Previous forenames

Previous surname

**Address**

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Date of birth

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Other directorships

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**CD****AD**

Post Town

County/Region

Postcode

Country

Day Month Year

**DO**

Nationality

**NA****OC****OD**

Name                      \*Style/Title

Forenames

Surname

\*Honours etc

Previous forenames

Previous surname

**Address**

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Date of birth

Business occupation

Other directorships

**CD****AD**

Post Town

County/Region

Postcode

Country

Day Month Year

**DO**

Nationality

**NA****OC****OD**

\* Voluntary details

Continuation Sheet