

363a

Please complete in typescript, or in bold black capitals.

CHFP010

Company Number | 1704435

Annual Return

012680/5

Company Name in full	MERLEWOOD ESTATES LIMITED

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Date of this return

The information in this return is made up

Month Year

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	

61 CHANDOS PLACE

Registered Office

Show here the address at the date of this return.

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

Post town

County / Region

LONDON

UK Postcode WC2N 4HG

Principal business activities

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

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

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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

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	Please tick the appropriate box
Company Secretary	Details of a new company secretary must be notified on form 288a.
(Please photocopy this area to provide details of joint secretaries).	Mrs
* Voluntary details.	STELLA
If a partnership give the names and addresses of the partners or the name of the partnership and office address.	SMITH RYEWATER NURSERY, FOLKE
Usual residential address must be Post town	SHERBORNE
given. In the case of a corporation, County / Region	DORSET UK Postcode DT9 5PL
give the registered or principal office Country address.	



Directors Please list directors in alphabetical order.		Details of new directors must be	notified on form 288a
N	ame * Style / Title		
Directors In the case of a director that is a corporate	Date of birth	Day Month Year 0 9 0 5 1 9 4 6	
or a Scottish firm, the name is the	Forename(s)	CLIVE PATRICK	
corporate or firm name.	Surname	FARRELL	
A	ddress	RYEWATER NURSERY, FOLKE	
Usual residential address must be given. In the case	Doct town		
of a corporation, give the registered	Post town County / Region	SHERBORNE DORSET	UK Postcode DT9 5PL
or principal office address.	Country		Nationality BRITISH
	Business occupation	COMPANY DIRECTOR	
* Voluntary details.			
N	ame * Style / Title	Day Morth Year	
Directors In the case of a director that is a corporate	Date of birth	Day Month Year	
or a Scottish firm, the name is the	Forename(s)		
corporate or firm name.	Surname		· · · · · · · · · · · · · · · · · · ·
	ddress		
Usual residential address must be			
given. In the case of a corporation,	Post town		
give the registered or principal office	County / Region		_UK Postcode [
address.	Country		Nationality
	Business occupation		



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)			
ORDINARY		100	£100.00			
	Totals	100	100.00			
List of past and present shareh (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 change A list of changes is end A full list of shareholde	on pap	er in another format			
Certificate Sign	knowledge and belief	nation given in this return	-			
† Please delete as appropriate.	†/a director / secretary					
When you have signed the return send with the fee to the Registrar of Companies. Cheques should be made payable to Companies House.	it This return in	cludes 1 (enter number)	continuation sheets.			
Please give the name, address, telephonumber and, if available, a DX number and Exchange of the person Companies	s [CHANDOS PLACE, LOND	ON, WC2N 4HG			
House should contact if there is any que	ery.	Tel: 020 7836 4555				

DX number [



Tel: 020 7836 4555 Tel | Fax: 020 7420 5161

DX exchange |



List of past and present shareholders Schedule to form 363a

Company Secretary			Schedule to form 3			form 3	6
CHFP010	Company Number	1704435					

Company Name in full MERLEWOOD ESTATES LIMITED

> Changes to shareholders particulars or details of the amount of stock or shares transferred must be completed each year

You must provide a "full list" of all the company shareholders on:

The company's first annual return following the incorporation;

Every third annual return after a full list has been provided

List the company shareholders in alphabetical order or provide an index

➤ List joint shareholders consecutively

	Shares or amount of stock transferred (if appropriate)			
Shareholders' details	Class and number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer	
Name CLIVE PATRICK FARRELL	£1.00 ORDINARY			
Address RYEWATER NURSERY, FOLKE, SHERBORNE, DORSET				
UK postcode DT9 5PL	Shares Held 99			
Name STELLA SMITH	£1.00 ORDINARY			
Address RYEWATER NURSERY, FOLKE, SHERBORNE, DORSET				
UK postcode DT9 5PL	Shares Held 1			
Name				
Address				
UK postcode				