



	 10						* *
æ.		100	8				
	m	68	21		et		
	风碑	49-453	65.43 SI	56 E	W	6.00 M	13 B

	This form should be completed in black.	Annual Return
	Company number	CN 02172518
j.	Company name	THE NATIONAL LIFE STORY COLLECTION
	Date of this return (See note 1) The information in this return is made up to	Day Month Year DA / 8 0 6 9 4 Show date
	Date of next return (See note 2) If you wish to make your next return to a date earlier than the anniversary	Show data
	of this return please show the date here. Companies House will then send a form at the appropriate time.	DB
	Registered Office (See note 3) Show here the address at the date of this return.	RO 47 PRINCES GATE
e Neg	Any change of registered office must be notified on form 287.	Post town LONDON
	be notified on form 287.	County/Region
		Postcode SW7 2QA
	Principal business activities (See note 4) Show trade classification code	PA 8 9 9 3
	number(s) for principal activity or activities.	
	If the code number cannot be determined, give a brief description of principal activity.	

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,	RD
state here where it is kept.	
	Post town
	County/Region
	Postcode
Company type (See note 7)	
Public limited company	Ţ1
Private company limited by shares	T2
Private company limited by guarantee without share capital	тз✓
Private company limited by shares exempt under section 30	Please mark the appropriate box.
Private company limited by guarantee exempt under section 30	Т5
Private unlimited company with share capital	т6
Private unlimited company without share capital	T7
Company Secretary (See note 8)	Details of a new company secretary must be notified on form 288.
(Please photocopy this area to provide details of joint secretaries).	
Name *Style/Title	PAUL RICHARD
Forenames	
Surname	THOMPSON
*Honours etc	
Previous forenames	
Previous surname	
Address	AD 18 LONSDALE ROAD
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post town OXFORD
	County/Region OX FORDSHIRE
* Voluntary details	Postcode OX2 7EW Country U.K

Issued share capital (Sec note 9) Enter details of all the shares in issue at the date of this return.	Class Number	Aggregate Nominal Val
	Totals	
List of past and present members (Use attached schedule where appropriate)	2/8	Please mark the appropriate box(es)
A full list is required if one was not included with either of the last two returns.	There were no changes in the period	
(See note 10)		on paper not on pap
	A list of changes is enclosed	
	A full list of members is enclosed	
Elective resolutions (See note 11) (Private companies only)	If an election is in force at the date of this retu with annual general meetings, mark this box	urn to dispense
	If an election is in force at the date of this retu with laying accounts in general meetings, man	urn to dispense k this box
Certificate I certify that the information given in this return is true to the best of my		
knowledge and belief.	Signed Phur Phur	Secretary/Direct
	Date V 1000WW 94	(* delete as appropriate
	This return includes conti	nuation sheets.
Total and about Occupation House		
To whom should Companies House direct any enquiries about the	SHAW & COMPANY	
information shown in this return?	195 BANBURY ROAD	
	OXFORD	
		Postcode OXZ 7AF
	Telephone (0865) 310031	Extension
그 용원하다 한 일당은 그리네요? 그 하다		

lease list directors in alphabetical order. Details of new directors must be notified on form 288. CD LORD Name *Style/Title ASA **Forenames** BRIGGS Surname *Honours etc Previous forenames Previous surname AD WORCESTER COLLEGE Address Usual residential address must be given. In the case of a corporation, give the registered or principal office address. Post town OXFORD County/Region OXFORDSHIRE 0x1 2HB 1 UK Postcode Country DO 17 0521 Date of birth Nationality NA BRITISH **Business occupation** PROVOST WORCESTER COLLEGE Other directorships Name *Style/Title PROFESSOR RICHARD **Forenames** Surname THOMPSON *Honours etc Previous forenames Previous surname **Address** AD LONSDALE ROAD Usual residential address must be given. In the case of a corporation, give the registered or principal office address. OXFORD Post town County/Region OXFORD SHIRE Postcode OX2 7EW Country U.K DO 200835 Nationality NA BRITISH Date of birth UNIVERSITY LECTURER **Business occupation** Other directorships OD * Voluntary details

(See note 8)

Directors (continued)	
	le/Title CD
	names JENNIFER
	Irname WINGATE
*Hono	
Previous fore	
Previous su	AD 10 PARK UILLAGE WEST
Address	
Usual residential address must be In the case of a corporation, gi	ive the
registered or principal office ad	
	County/Region
	Postcode NW1 4AE Country UK
Date o	of birth DO 014 05 36 Nationality NA BRITISH
Business occu	pation SOLICITOK
Other directo	orships OD
	e/Title CD DR
e a Sanggaga Aferika 🦠	Company of Van D. Marine Van C.
	Okio tea Da di
	rname PERETZ-BROWN
*Honou	urs etc
Previous forei	
Previous su	
	AD A DENMAN'S LAME
Address	
Usual residential address must be	iva the
Usual residential address must be In the case of a corporation, gi	iva the OV Coord
Usual residential address must be In the case of a corporation, gi	Post town OXFORD County/Region OX6 N
Usual residential address must be In the case of a corporation, gi	rive the ddress. Post town OX FOXO
Usual residential address must be In the case of a corporation, gi registered or principal office ad	Post town OX FORD County/Region OX6 N
Usual residential address must be In the case of a corporation, gi registered or principal office ad	Post town County/Region OXON Postcode OX29PF Country Nationality NA BRITISH
	Post town OXFORD County/Region OX6 N Postcode OX2 9 PF Country VK of birth DO 1 1 0 6 4 9 Nationality NA BRITISH Pation OC HEALTH AND SAUM STRVICE CANSULTANT

Director	'S (continued)	
Name	*Style/Title	CD MR
	Forenames	PETER VARWICK
	Surname	HANDS
	*Honours etc	
	Previous forenames	
	Previous surname	
Address		AD ORCHARO HOUSE
Usual resider	ntial address must be given. of a corporation, give the	SUNNIMWELL
	or principal office address.	Post town OXFORD
		County/Region OXDN
		Postcode Country UK
	Date of birth	DO 07 17 46 Nationality NA 13 RITISH
	Business occupation	OC DIRECTOR, ALLMAKES LTD
	Other directorships	00
		RESIGNED 31/3/14
Name	*Style/Title	CD
	Forenames	
	Surname	
	*Honours etc	
	Previous forenames	
	Previous surname	
Address		AD
	tial address must be given.	
	f a corporation, give the principal office address.	Post town
		County/Region
		Postcode Country
	Date of birth	Postcode Country Nationality NA
	Date of birth Business occupation	
		DO Nationality NA
* Voluntary d	Business occupation Other directorships	DO Nationality NA