



SECRETARIAT

Please complete in typescript,
or in bold black capitals.

CHFP029

363a

102026 | 45

Annual Return

Company Number 2303464

Company Name in full Dixons City Technology College Charitable Trust

Date of this return

The information in this return is made up to

Day Month Year

09 / 04 / 2004

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

09 / 04 / 2005

Registered Office

Show here the address at the date of
this return.

MAYLANDS AVENUE

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

Post town

HEMEL HEMPSTEAD

County / Region

HERTFORDSHIRE

UK Postcode

HP2 7TG

Principal business activities

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

8021

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

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
or
Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB
for companies registered in Scotland DX 235 Edinburgh



A25
COMPANIES HOUSE
23/04/04
2000 September 1999

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 here 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

(Please photocopy this area to provide details of joint secretaries).

* Voluntary details.

If a partnership give the names and addresses of the partners or the name of the partnership and office address.

Name

* Style / Title

Address

Forename(s)

Surname(s)

Post town

County / Region

Country

MR

GEOFFREY DAVID

BUDD

NIMROD

32 CHIPPERFIELD ROAD

KINGS LANGLEY

HERTFORDSHIRE

UK Postcode

W D 4 9 J A

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

Directors

Details of new directors must be notified on form 288a

Please list directors in alphabetical order.

Name * Style / Title

MS

Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.

Day Month Year

Date of birth

2 6 / 0 3 / 1 9 5 0

Forename(s)

GRACE

Surname

ALDERSON

Address

WHITEROCK BARN, DEAN HOUSE LANE

NR STAINLAND

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

Post town

HALIFAX

County / Region

UK Postcode

H X 4 9 L G

Country

ENGLAND

Nationality

BRITISH

Business occupation

CO-OPTED GOVERNOR

* Voluntary details.

Name * Style / Title

MR

Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.

Day Month Year

Date of birth

1 8 / 0 2 / 1 9 4 4

Forename(s)

GEOFFREY DAVID

Surname

BUDD

Address

NIMROD, 32 CHIPPERFIELD ROAD

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

Post town

KINGS LANGLEY

County / Region

HERTFORDSHIRE

UK Postcode

W D 4 9 J A

Country

Nationality

BRITISH

Business occupation

CHARTERED SECRETARY

Directors

Details of new directors must be notified on form 288a

Please list directors in alphabetical order.

Name * Style / Title

Day Month Year

Date of birth

1 1 / 0 3 / 1 9 3 8

Forename(s)

BRYAN WILLIAM

Surname

COLLINS

Address

HEATHFIELD, BURLEY WOODHEAD

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

Post town

ILKLEY

County / Region

WEST YORKSHIRE

UK Postcode

L S 2 9 7 A R

Country

ENGLAND

Nationality

BRITISH

Business occupation

EDUCATION CONSULTANT

* Voluntary details.

Name * Style / Title

MR

Day Month Year

Date of birth

1 8 / 0 3 / 1 9 4 7

Forename(s)

DAVID JOHN

Surname

DAVIES

Address

BRACKEN HILL, DRURY LANE

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

Post town

PANNAL

County / Region

NORTH YORKSHIRE

UK Postcode

H G 3 1 E T

Country

ENGLAND

Nationality

BRITISH

Business occupation

DIRECTOR

Directors

Details of new directors must be notified on form 288a

Please list directors in alphabetical order.

Name * Style / Title MRS.

Day Month Year

Date of birth 2 0 / 1 2 / 1 9 5 1

Forename(s) PATRICIA

Surname DRAKE

Address 7 ELDRICH CLOSE

Usual residential address must be given. In the case of a corporation or a Scottish firm, the name is the corporate or firm name.

Post town BRADFORD

County / Region WEST YORKSHIRE UK Postcode B D 1 2 0 H W

Country Nationality BRITISH

Business occupation QUALITY MANAGER NHS TRUST

* Voluntary details.

Name * Style / Title MR.

Day Month Year

Date of birth 2 7 / 1 2 / 1 9 5 2

Forename(s) JOHN

Surname FRANCIS

Address GATES GARTH, HEATH PARK ROAD

Usual residential address must be given. In the case of a corporation or a Scottish firm, the name is the corporate or firm name.

Post town LEIGHTON BUZZARD

County / Region BEDS UK Postcode L U 7 3 B B

Country ENGLAND Nationality BRITISH

Business occupation COMPANY DIRECTOR

Directors

Details of new directors must be notified on form 288a

Please list directors in alphabetical order.

Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Name	* Style / Title	MR													
			Day	Month	Year											
	Date of birth		2	4	/	0	8	/	1	9	5	0				
	Forename(s)	IAN BARRY														
	Surname	GREENWOOD														
	Address	38 PROSPECT WALK														
Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.																
		Post town	SHIPLEY													
		County / Region	WEST YORKSHIRE					UK Postcode	B	D	1		2	L	R	
		Country	ENGLAND					Nationality	BRITISH							
		Business occupation	DIRECTOR													

* Voluntary details.

Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Name	* Style / Title	SIR													
			Day	Month	Year											
	Date of birth		0	5	/	1	2	/	1	9	4	3				
	Forename(s)	JAMES FREDERICK														
	Surname	HILL														
	Address	ROSEVILLE, MOOR LANE														
Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.																
		Post town	MENSTON													
		County / Region	WEST YORKSHIRE					UK Postcode	L	S	2	9	6	A	P	
		Country	ENGLAND					Nationality	BRITISH							
		Business occupation	DIRECTOR													

Directors

Details of new directors must be notified on form 288a

Please list directors in alphabetical order.

Name	* Style / Title										
		Day	Month	Year							
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	3	1	12	19	52					
	Forename(s)	DAVID GRAHAM									
	Surname	HOLMES									
Address	TADPOLE COTTAGE, 236 WYKE LANE										
	WYKE										
Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.	Post town	BRADFORD									
	County / Region			UK Postcode	B	D	1	2	9	E	L
	Country	ENGLAND		Nationality	BRITISH						
	Business occupation	DIRECTOR									

* Voluntary details.

Name	* Style / Title	MRS									
		Day	Month	Year							
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	0	7	10	19	41					
	Forename(s)	MARION RUTH									
	Surname	LE PLA									
Address	6 YEW TREE CRESCENT, CHELOW DENE										
Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.	Post town	BRADFORD									
	County / Region			UK Postcode	B	D	8		O	A	G
	Country			Nationality							
	Business occupation	MATRON OF NURSING HOME									

Directors

Details of new directors must be notified on form 288a

Please list directors in alphabetical order.

Name	* Style / Title	MR		
		Day	Month	Year
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	2	5	01 / 1968
	Forename(s)	BRUCE		
	Surname	MARSH		
Address		2 ASH CLOSE		
Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.	Post town	ABBOTS LANGLEY		
	County / Region	HERTFORDSHIRE	UK Postcode	W D 5 O D N
	Country	ENGLAND	Nationality	BRITISH
	Business occupation	DIRECTOR		

* Voluntary details.

Name	* Style / Title	MR		
		Day	Month	Year
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	1	8	09 / 1948
	Forename(s)	JONATHAN		
	Surname	MOORHOUSE		
Address		BRECKS LODGE, 92 BRADFORD ROAD		
Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.	Post town	CLAYTON		
	County / Region	BRADFORD	UK Postcode	B D 1 4 6 D N
	Country	ENGLAND	Nationality	BRITISH
	Business occupation	CO-OPTED GOVERNOR		

Directors

Details of new directors must be notified on form 288a

Please list directors in alphabetical order.

Name * Style / Title

MR.

Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.

Date of birth

Day Month Year
2 9 / 0 8 / 1 9 5 2

Forename(s) TIMOTHY HARVEY

Surname RATCLIFFE

Address

STONEACRE 9, STUBHAM RISE, MIDDLETON

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

Post town ILKLEY

County / Region WEST YORKSHIRE

UK Postcode L S 2 9 0 A P

Country

Nationality BRITISH

Business occupation COMMERCIAL SOLICITOR

* Voluntary details.

Name * Style / Title

MRS

Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.

Date of birth

Day Month Year
3 1 / 0 1 / 1 9 4 4

Forename(s) JOANNE IRENE

Surname WILLIAMS

Address

11, LISKER AVENUE

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

Post town OTLEY

County / Region WEST YORKSHIRE

UK Postcode L S 2 1 1 D G

Country

Nationality BRITISH

Business occupation CO-OPTED GOVERNOR

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)

Totals		

List of past and present shareholders

(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 changes in the period



on paper in another format

A list of changes is enclosed

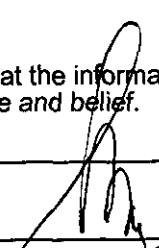


A full list of shareholders is enclosed

**Certificate**

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

Signed



Date

21. 4. 04

† Please delete as appropriate.

† a director/secretary

When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to **Companies House**.

This return includes



(enter number)

continuation sheets.

Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should contact if there is any query.

HELEN THOMAS, C/O DIXONS GROUP, MAYLANDS AVENUE, HEMEL HEMPSTEAD, HERTFORDSHIRE, HP2

7TG

Tel 01727 202752

DX number 124021

DX exchange Hemel Hmpstd 4



SECRETARIAT

**List of past and present shareholders
Schedule to form 363a**

CHFP029

Company Number 2303464

Company Name in full Dixons City Technology College Charitable Trust

- 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 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

Shareholders' details	Class and number of shares or amount of stock held	Shares or amount of stock transferred (if appropriate)	
		Class and number of shares or amount of stock transferred	Date of registration of transfer
Name _____ Address _____ _____ _____ UK Postcode L L L L L L L			
Name _____ Address _____ _____ _____ UK Postcode L L L L L L L			
Name _____ Address _____ _____ _____ UK Postcode L L L L L L L			