



Annual Return

Company Name: **EXTEND EXERCISE TRAINING LIMITED**

Company Number: **02305901**



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Company Name: **EXTEND EXERCISE TRAINING LIMITED**

Company Number: **02305901**

Date of this return: **21/06/2016**

Sic Codes: **88100**

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

Situation of **2 PLACE FARM WHEATHAMPSTEAD ST. ALBANS HERTFORDSHIRE**

Registered Office: **AL4 8SB**

Officers of the company

Company Director 1

Type: **Person**
Full Forename(s): **MR ANDREW THOMAS JOHN**
Surname: **COONEY**
Service Address: **2 PLACE FARM ST. ALBANS PLACE FARM WHEATHAMPSTEAD
ENGLAND AL4 8SB**

Country/State **ENGLAND**

Usually Resident:

Date of Birth: ****/06/1963**

Nationality: **BRITISH**

Occupation: **BUSINESS
MANAGER**

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Company Director 2

Type: **Person**
Full Forename(s): **MR JOHN EDWARD TYRRELL**
Surname: **PENNY**
Service Address: **recorded as Company's registered office**

Country/State **ENGLAND**

Usually Resident:

Date of Birth: ****/12/1937**

Nationality: **BRITISH**

Occupation: **LECTURER**

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Company Director 3

Type: **Person**
Full Forename(s): **ANN MARION**
Surname: **THOMSON**
Service Address: **31 SYON PARK GARDENS ISLEWORTH OSTERLEY
TW7 5NE**

Country/State **UNITED KINGDOM**

Usually Resident:

Date of Birth: ****/05/1938**

Nationality: **BRITISH**

Occupation: **PHYSIOTHERAPY**

Company Director 4

Type: **Person**
Full Forename(s): **MRS JOY**
Surname: **WATKINS**
Service Address: **recorded as Company's registered office**

Country/State **ENGLAND**

Usually Resident:

Date of Birth: ****/11/1966**

Nationality: **BRITISH**

Occupation: **DIRECTOR**

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Authorisation

Authenticated

This form was authorised by one of the following:

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

