

Please complete in typescript, or in bold black capitals.



363a

Annual Return

Company Number

02513183

Company Name in full

¥F?	\mathbf{F}	$\mathbf{A} 0$	

LABURNUM COURT RESIDENTS
ASSOCIATION (STANMORE) LIMITED

Date of this return (See note 1)
The information in this return is made up to

 Day
 Month
 Year

 19
 06
 9.8

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

Registered Office (See note 3)
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

Postcode

STANMORE

DENNIS

MIDDLESEX

LABURNUM

LANE

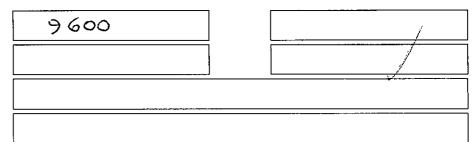
I HAT 4JP

Principal business activities

(See note 4)

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.



COURT



Form revised March 1995

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff for companies registered in England and Wales

for companies registered in England and Wales or

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

Register of me	embers (See note 5)	,
If the register of m	embers is not kept at the	
registered office, s	tate here where it is kept.	
		3
	Post town	
	County / Region	Postcode
	benture holders	
(See note 6) If there is a regist	er of debenture holders	
and it is not kept state here where it	at the registered office,	
	Post town	
	County / Region	Postcode
Company type	(See note 7)	
Public limited compa		
Private company limi	ted by shares	
	ted by guarantee without	
·	ed by shares exempt under	Please mark the appropriate box
Private company limit under section 30	ed by guarantee exempt	
Private unlimited com	pany with share capital	
Private unlimited com	pany without share capital	
Company Secre	etary (see notes 8)	Details of a new company secretary must be notified on form 288a.
(Please photocopy this area to provide	Name * Style / Title	
details of joint secretaries).	•	MR5 *Honours etc
,	Forename(s)	BERYL LILLIAN
* Voluntary details.	Surname	MANN
. voluntary details.	Previous forename(s)	
	Previous surname(s)	
	Address	5 LABURNUM COURT
Hough residents		DENNIS LANE
Usual residential address must be given in the case of a	Post town	STANMORE
given. In the case of a corporation, give the registered or principal	County / Region	MIDDLESEX Postcode HA7 4JP
office address.	Country	

Details of new directors must be notified on form 288a

DIRECTORS (contin	nued)	_	,						
•	Name	* Style / Title	MR				Day	Month	Year
* Honours etc					Date of birth 10 07				
		Forename(s)	LOUIS						
		Surname	BLAIR						
	Previou	ıs forename(s)							
	Previo	us surname(s)							
	Address		17 LABU	RNU	M COUR	Т			
Havel residentia			DENNIS	LA	NE		Æ		
Usual residentia address must be given. In the case of a	Э	Post town	STANMOR	₹€			V		
corporation, give the registered or principal	e 0	ounty / Region	MIDDLE	MIDDLESEX		Postcode	HA7 43		JP
office address.		Country			Nationali		B	RITISE	(
	Busines	s occupation	RETIRED						
	Other di	rectorships							
* Voluntary details									
		,			1				
	Name	* Style / Title	MR			۲	Day	Month	Year
		* Honours etc			Date	of birth	09	05	14
		Forename(s)	MORRIS	ART	THUR				
		Surname	MARSTO	2					
	Previo	us forename(s)	1						
	Previ	ous surname(s)							
	Address	S	35 LABURNUM COURT						
Usual residentia	al		DENNIS	LA	NE				
address must be given. In the case of	e	Post town	STANMORE						
corporation, give the registered or princip	ne (County / Region	MIDDLE.	SEX		Postcode	H	A7 4	-JP
office address.	*4	Country			1	Nationality	8	RITIS	н
	Busines	ss occupation	RETIRED)					
÷	Other d	irectorships							*
									

Issued share capital (see note 9) 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)
List of past and present members (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two	There were no changes in	the period	
returns. (see note 10)		on paper	in another format
	A list of changes is enclos	ed	
	A full list of members is en	closed	
Elective resolutions (Private companies only) (See note 11)	If at the date of this return a	an election is in force nnual general meetin	e to dispense with ags, mark this box
	If at the date of this return laying accou	an election is in force nts in general meetin	e to dispense with gs, <i>mark this box</i>
Certificate	I certify that the information knowledge and belief.	n given in this return i	is true to the best of my
Signed	see confinuation	Date	
† 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.	rnis return includes	(enter number)	ntinuation sheets.
Please give the name, address, telephone number, and if available,	ISP CHAI	RTERED ACCOUNTA	ANTS
a DX number and Exchange, for the person Companies House should	PREA 112 S	HER HOUSE TATION ROAD	
contact if there is any query.	HA8	WARE, MIDDLESEX 7AQ 0181-952 7733 FAX: (1181-952 6272
	DX number	DX exchange	

Details of new directors must be notified on form 288a Directors (continued) * Style / Title MISS Name Day Month Year Date of birth 03 1920 * Honours etc 02 Forename(s) ANITA Surname MENDOZA Previous forename(s) Previous surname(s) **Address** LABURNUM COURT DENNIS LANE Usual residential address must be Post town STANMORE given. In the case of a corporation, give the County / Region Postcode HAフ 4 JP MIDDLESEX registered or principal office address. BRITISH Country **Nationality Business occupation** RETIRED Other directorships * Voluntary details * Style / Title Name Day Month Year * Honours etc Date of birth Forename(s) Surname Previous forename(s) Previous surname(s) **Address** Usual residential address must be Post town given. In the case of a corporation, give the Postcode County / Region registered or principal office address. **Nationality** Country **Business occupation** Other directorships

	Class	Number of	Aggregate
Issued share capital (see note 9)	(e.g. Ordinary/Preference)	shares issued	Nominal Value
Enter details of all the shares in issue			(i.e Number of shares issued multiplied by nominal value
at the date of this return.			per share)
]
	<u> </u>		
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			7
			1
	Totals		
	iolais		[]
			J
List of past and present members	There were no changes in	n the newled	
(Use attached schedule where appropriate) A full list is required if one was not	There were no changes in	ii iiie period	•
included with either of the last two			
returns.			
(see note 10)		on paper	in another format
	A list of changes is enclose	has	
	The or originates is choice	Jeu	
			
	A full list of members is e	nclosed	
			<u> </u>
Elective resolutions	If at the date of this return	an election is in force	to dispense with
(Private companies only)	:	annual general meetir	igs, mark this box
(See note 11)			
	If at the date of this return	an election is in force	to dispense with
	laying accou	unts in general meetin	gs, mark this box
Contitiont			
Certificate	I certify that the information	on given in this return i	s true to the best of my
	knowledge and belief.		
			
Signed	Cham.	Date	27-9-98
1	(201.		
† Please delete as appropriate.	† a_director /secretary		
		•	
When you have signed the return send it	•		
with the fee to the Registrar of Companies.	This return includes	ONE CON	ntinuation sheets.
Cheques should be made payable to			
Companies House.		(enter number)	
Please give the name, address,	<u></u>	· · · · · · · · · · · · · · · · · · ·	
telephone number, and if available,	ISP	100011NTTANTE	
a DX number and Exchange, for	PREMIER I	ED ACCOUNTANTS	
the person Companies House should	112 STATIO	ON ROAD	
contact if there is any query.		, MIDDLESEX	
	HAS 7AQ TEL: 0181-9	Tel 952 7733 FAX: 0181-95	2 6272
	DX number	DX exchange	

Directors (see notes		Details of new directors must be notified on form 288a							
Please list directors in al									
, Na	me * Style / Title			Day Month Year					
	* Honours etc		Date of birth	10 08 22					
	Forename(s)	MORDECHAI							
	Surname	LESLER							
į	Previous forename(s)								
	Previous surname(s)								
Ad	dress	11 LABURNU	M COURT						
Usual residential		DENNIS LA	NE	<u> </u>					
address must be given. In the case of a corporation, give the	Post town	STANMORE							
registered or principal office address.	County / Region	MIDDLESE	X Postcode	HA7 4JP					
	Country		Nationality	BRITISH					
Bu	siness occupation	RETIRED							
Ot	her directorships								
* Voluntary details.									
Na	* Style / Title	MR		Day Month Year					
	* Honours etc		Date of birth	25 12 19					
	Forename(s)	PHILIP							
	Surname	TECKS							
	Previous forename(s)								
	Previous surname(s)								
Ac	ddress	28 LABURNUM COURT							
Usual residential		DENNIS LANE							
address must be given. In the case of a	Post town	STANMORE							
corporation, give the registered or principal office address.	County / Region	MIDDLESEX	HA7 4JP						
	Country	·	Nationality	BRITISH					
В	usiness occupation	RETIRED							
01	ther directorships								

Directors (continued)			Details of new directors must be notified on form 288a							
Name * Style / Title * Honours etc		MR			"Day "Month Yea					
		* Honours etc		D	ate of birth	03	09	19		
		Forename(s)	ERIC			<u></u>				
		Surname	SUGERMAN							
I	Previo	ous forename(s)								
	Previ	ous surname(s)					<u> </u>			
Ad	ldress	5	3 LABURNUM COURT							
Usual residential			DENNIS LAN	ΙE		-				
address must be given. In the case of a		Post town	STANMORE							
corporation, give the registered or principal office address.	(County / Region	MIDDLESEX	Postcode		HA7 4JP				
onice address.		Country			Nationality	BRITISH				
Bu	sines	s occupation	RETIRED							
Oti	her di	rectorships			-					
* Voluntary details.					<u> </u>					
							•			
Na	me	* Style / Title	MRS		_	Day	Month	Year		
		* Honours etc		Da	ate of birth	23	05	32		
		Forename(s)	BERYL LILLIAN							
		Surname	MANN							
F	Previo	us forename(s)								
	Previo	ous surname(s)								
A	ddres	s	5 LABURNUM COURT							
Usual residential			DENNIS LANE			V				
address must be given. In the case of a		Post town	STANMORE							
corporation, give the registered or principal office address.	C	County / Region	MID DLESEX Postcoo		Postcode	HA7 4JP				
omoo addiess.		Country	·		Nationality	BR	IT 15H			
Business occupation			RETIRED							
Other directorships										
		[