

Please complete in typescript,
or in bold black capitals.

Annual Return

002431/15.

CHFP010

Company Number

2515633

Company Name in full

SILVER CLEF LIMITED

Date of this return

The information in this return is made up to

Day		Month		Year		
2	5	0	6	2	0	0

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		

Registered Office

Show here the address at the date of this return.

2 LISSENDEN GARDENS

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

Post town

LONDON

County / Region

UK Postcode

NW5 1PP

Principal business activities

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

9305

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



A46 *AJJWASD7M* 0315
COMPANIES HOUSE 09/08/02
LD6 0430
COMPANIES HOUSE 30/07/02

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

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

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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.

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

Name

* Style / Title

Mr

Forename(s)

JOHN GRAHAM

Surname

WHITEHOUSE

Address

THE BROWN HOUSE

Post town

HOLMBURY ST MARY

County / Region

SURREY

UK Postcode

RH5 6PF

Country

Directors*Please list directors in alphabetical order.***Details of new directors must be notified on form 288a**

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

Name	* Style / Title	Mr	
		Day	Month
		Year	
Date of birth		1	2
		0	3
		1	9
		5	0
Forename(s)	JOHN GRAHAM		
Surname	WHITEHOUSE		
Address	THE BROWN HOUSE		
Post town	HOLMBURY ST MARY		
County / Region	SURREY	UK Postcode	RH5 6PF
Country		Nationality	BRITISH
Business occupation	CHARTERED ACCOUNTANT		

* Voluntary details.

Name	* Style / Title		
		Day	Month
		Year	
Date of birth		2	1
		0	6
		1	9
		6	0
Forename(s)	MICHAEL DAVID		
Surname	MILLER		
Address	HIGHTREES, 15A LINKSWAY		
Post town	NORTHWOOD		
County / Region	MIDDLESEX	UK Postcode	HA6 2XA
Country		Nationality	BRITISH
Business occupation	DIRECTOR		

Directors*Please list directors in alphabetical order.***Details of new directors must be notified on form 288a**

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

Name	* Style / Title			
	Day	Month	Year	
Date of birth	2	8	0	8
	1	9	4	0
Forename(s)	NANCY MARIAN			
Surname	JARRATT			
Address	74B ELSHAM ROAD			
Post town	LONDON			
County / Region			UK Postcode	W14 8HH
Country			Nationality	BRITISH
Business occupation	COMPANY DIRECTOR			

* Voluntary details.

Name	* Style / Title		MR	
	Day	Month	Year	
Date of birth	2	8	0	1
	1	9	4	4
Forename(s)	SAMUEL GEORGE			
Surname	ALDER			
Address	THE GRANGE , CLYPSE MOAR			
Post town	ONCHAN			
County / Region			UK Postcode	IM4 5BG
Country	ISLE OF MAN		Nationality	BRITISH
Business occupation	CHARTERED ACCOUNTANT			

Directors*Please list directors in alphabetical order.***Details of new directors must be notified on form 288a**

Name * Style / Title _____

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

Day Month Year
Date of birth 0 8 0 6 1 9 4 4

Forename(s) WILLIAM WARDELL

Surname ROBERTSON

Address 55 FULHAM HIGH STREET

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

Post town LONDON

County / Region UK Postcode SW6 3JJ

Country Nationality BRITISH

Business occupation COMPANY DIRECTOR

* Voluntary details.

Name * Style / Title _____

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

Day Month Year
Date of birth

Forename(s)

Surname

Address

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

Post town

County / Region UK Postcode

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 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

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on paper

in another format

A list of changes is enclosed

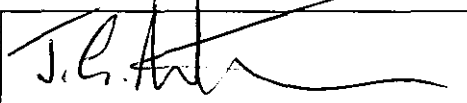
☐☐

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

22/7/02

† 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

1

continuation sheets.

(enter number)

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

MACINTYRE HUDSON (LONDON) GLY, GREENWOOD HOUSE,

4/7 SALISBURY COURT, LONDON, EC4Y 8BT

Tel

DX number

DX exchange

List of past and present shareholders Schedule to form 363a

CHFP010

Company Number | 2515633

Company Name in full | SILVER CLEF 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

Shareholders' details	Class and number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Shares or amount of stock transferred (if appropriate) Date of registration of transfer
Name NORDOFF-ROBBINS MUSIC THERAPY Address GREENWOOD HOUSE, 4/7 SALISBURY COURT, LONDON UK postcode EC4Y 8BT	£1.00 ORDINARY Shares Held 99		
Name S G ALDER & THE NORDOFF-ROBBINS MUSIC THERAPY Address GREENWOOD HOUSE, 4/7 SALISBURY COURT, LONDON UK postcode EC4Y 8BT	£1.00 ORDINARY Shares Held 1		
Name Address UK postcode			