

THE REGISTRAR OF COMPANIES COMPANIES HOUSE CROWN WAY CARDIFF CF4 3UZ COMPANIES HOUSE 04/01/9

This form should be completed in black.

The information printed below is taken from Companies House records as at 27/11/96 If this information requires amendment use the spaces opposite.

Date of this return (See note 1)

The information in this return should be made up to a date not later than

Day	Month	Year	
1,3	1 2	9 6	

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.

This is the address registered by Companies House.

16 BANCROFT

HITCHIN

HERTFORDSHIRE SG5 1JQ

Principal business activities (See note 4)

Trade classification is 5242 RETAIL SALE OF CLOTHING

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

Return

02671267 of company number

company name GARDEN HOUSE HOSPICE TRADING LIMITED

company type PRIVATE COMPANY LIMITED BY SHARES

If you are making the return up to an earlier date, show the date here. Please note that the form must be delivered to Companies House within 28 days of this earlier date.

Day	Month	Year

Day	Day Month Y	
1		

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Register of members (See note 5)	If the information shown needs amendment, give details below and, for secretary and director particulars, the date of any change.
The register is kept at	*
REGISTERED OFFICE	
Register of debenture holders (See note 6)	
Any register of debenture holders (or duplicate) is kept at	
Company Secretary (See note 7)	
Particulars of a new secretary must be notified on form 288.	Day Month Year Date of any change.
DAVID RICHARD COX HEYMANS 58 LUCAS LANE HITCHIN	
HERTFORDSHIRE SG5 2LT	
If this person has ceased to be secretary, please state when.	Day Month Year
Directors (See note 7)	
Particulars of a new director must be notified on form 288. BERNARD JAMES DAVIES 165 FAIRVIEW ROAD STEVENAGE HERTFORDSHIRE SG1 2NE	Day Month Year Date of any change.
Date of Birth:- 20/10/32 Nat:BRITISH Occ:ACCOUNTANT(RETIRED)	
If this person has ceased to be director, please state when.	Day Month Year Date of resignation.
Show any relevant current and previous directorships. PAGE 2	NORTH HERIS HOSPIES CARE ASSOCIATION

If the information shown needs amendment, give details below and the date of any change.

Directors - continued Particulars.	Day Month Year Date of any change.
NO MORE DIRECTORS - ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.	
If this person has ceased to be director, please state when.	Day Month Year Date of resignation.
Show any relevant current and previous directorships.	
Particulars.	Day Month Year Date of any change.
NO MORE DIRECTORS - ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.	
If this person has ceased to be director, please state when. Show any relevant current and previous directorships.	Day Month Year Date of resignation.
Particulars.	Day Month Year L Date of any change.
NO MORE DIRECTORS - ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a	•
If this person has ceased to be director, please state when.	Day Month Year
Show any relevant current and previous directorships.	

Issued Share Capital (See note 8) Enter details of all shares in issue at the date of this return.	Class (eg Ordinary/ Preference etc.) s		Aggregate nominal value (ie Number of shar ssued multiplied lominal value per share
List of past and present members (See note 9) (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two returns. The last full members list was at 13/12/95	Totals There were no cha	anges in the period	Please mark the appropriate box.
Elective resolutions (See note 10) (Private companies only) If an elective resolution is in force at the date of this return to dispense with annual general meetings, mark this box. If an elective resolution is in force at the date of this return to dispense with laying accounts in general meetings, mark this box.	A list of changes in A full list of members	s enclosed	not on paper
Certificate I certify that the information given in this return is true to the best of my knowledge and belief. I enclose the fee of £ 15. Cheques should be made payable to Companies House.	Date J January This return includes Please ensure all sections of	conti	ptary (Appropriate) nuation sheets. ompleted
To whom should Companies House direct any enquiries about the information shown in this return?	DRCHI 7/8-PORTI ALITCUIL YERTS	EYMANS U/LC L V Postcode SG	5 1AS
PAGE 6	Telephone 01707) 12 456 TExt	

≯ 02	671267 If the information shown needs amendment, give details below and the date of any change.
Directors - continued	
Particulars.	Day Month Year
FRANCES MARGARET DAVIES 165 FAIRVIEW ROAD STEVENAGE HERTFORDSHIRE SG1 2NE	Date of any change.
Date of Birth:- 15/09/37 Nat:BRITISH OCC:ACCOUNTANT (RETIRED) If this person has ceased to be director, plestate when.	Day Month Year Date of resignation.
Show any relevant current and previous di	rectorships.
Particulars. PETER WILLIAM HARKNESS 7 CLOISTERS ROAD LETCHWORTH HERTFORDSHIRE SG6 3JR	Day Month Year Date of any change.
Date of Birth:- 29/10/29 Nat:BRITISH Occ:ROSARIAN If this person has ceased to be director, plastate when. Show any relevant current and previous di	NORTH HERTS HOSPICE CARE ASSOCIATION DECI
Particulars. PETER EDWARD MCMENEMY RED ROOFS 96 BROADWAY LETCHWORTH HERTFORDSHIRE SG6 3PH	Day Month Year Date of any change.
Date of Birth:- 09/02/26 Nat:BRITISH Occ:RETIRED	
If this person has ceased to be director, postate when.	NORTH HERES HOSPICE CARE ASSOCIATE
Show any relevant current and previous d	II ecrosombo

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If the information shown needs amendment, give, details below and the date of any change.

Directors - continued	and the date of any onlinge,
Particulars.	Day Month Year
PAUL LEONARD WIDRA 9 SELVAGE LANE MILL HILL LONDON NW7 3SS	Date of any change.
Date of Birth:- 28/10/35 Nat:BRITISH OCC:RETAIL TRADING	Day Month Year
If this person has ceased to be director, please state when.	Date of resignation.
Show any relevant current and previous directorships.	
Particulars. PETER WILLIAM WILLMOTT	Day Month Year
JP REVERE 5 NEW ENGLAND CLOSE ST IPPOLYTS HITCHIN HERTFORDSHIRE SG4 7NQ	
Date of Birth:- 18/04/31 Nat:BRITISH Occ:RETIRED	
If this person has ceased to be director, please state when.	Day Month Year Date of resignation.
Show any relevant current and previous directorships.	NORTH HERTS HOSPICE CURE ASSOCIATION: WILLMOTT DIXON LTD (RESIGNED) WILLMOTT DIXON PROPERTIES LTD (RESIGNED)
Particulars.	Day Month Year Date of any change.
NO MORE DIRECTORS - ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.	
f this person has ceased to be director, please state when.	Day Month Year Date of resignation.
Show any relevant current and previous directorships.	
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