



Companies House
— for the record —

AR01 (ef)

Annual Return



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Received for filing in Electronic Format on the: **10/01/2013**

Company Name: **INTERNATIONAL ASSOCIATION OF HYDROLOGICAL SCIENCES LIMITED**

Company Number: **02676180**

Date of this return: **09/01/2013**

SIC codes: **58141**

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

Situation of Registered Office: **10 BROAD STREET
ABINGDON
OXFORDSHIRE
OX14 3LH**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **DR MICHAEL CHARLES**

Surname: **ACREMAN**

Former names:

Service Address: **C/O CENTRE FOR ECOLOGY & HYDROLOGY
MACLEAN BUILDING BENSON LANE
CROWMARSH GIFFORD
WALLINGFORD
OXFORDSHIRE
OX10 8BB**

Company Director 1

Type: **Person**

Full forename(s): **PROF CHRISTOPHE**

Surname: **CUDENNEC**

Former names:

Service Address: **AGROCAMPUS OUEST - INRA UMR 1069 SAS
65 RUE DE ST BRIEUC - CS 84215
35042 RENNES CEDEX
FRANCE**

Country/State Usually Resident: **FRANCE**

Date of Birth: **10/11/1972** *Nationality:* **FRENCH**

Occupation: **UNIVERSITY PROFESSOR**

Company Director 2

Type: **Person**
Full forename(s): **DOCTOR CHARLES ARNOLD**

Surname: **ONSTAD**

Former names:

Service Address: **PO BOX 1148 ENNIS
MONTANA 59729
USA
FOREIGN**

Country/State Usually Resident: **USA**

Date of Birth: **30/10/1941** *Nationality:* **AMERICAN**
Occupation: **AGRICULTURAL ENGINEER**

Company Director **3**

Type: **Person**
Full forename(s): **HEFIN GWYN**

Surname: **REES**

Former names:

Service Address: **7 INGREBOURNE WAY**
 DIDCOT
 OXFORDSHIRE
 OX11 7UP

Country/State Usually Resident: **ENGLAND**

Date of Birth: **06/06/1964** *Nationality:* **BRITISH**
Occupation: **HYDROLOGIST**

Company Director 4

Type: **Person**

Full forename(s): **JOHN**

Surname: **RODDA**

Former names:

Service Address: **YNYSLAS
BRIGHTWELL CUM SOTWELL
WALLINGFORD
OXFORDSHIRE
OX10 0RG**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **15/08/1934**

Nationality: **BRITISH**

Occupation: **SCIENTIST**

Company Director **5**

Type: **Person**
Full forename(s): **PROFESSOR DESMOND ERIC**

Surname: **WALLING**

Former names:

Service Address: **ORCHARD CLOSE
LYNCH ROAD THORVERTON
EXETER
DEVON
EX5 5PS**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **16/04/1945** *Nationality:* **BRITISH**

Occupation: **UNIVERSITY PROFESSOR**

Company Director **6**

Type: **Person**
Full forename(s): **PROFESSOR GORDON**

Surname: **YOUNG**

Former names:

Service Address: **34 VINCENT AVENUE
NIAGARA ON THE LAKE
ONTARIO
CANADA
L0S 1J0**

Country/State Usually Resident: **CANADA**

Date of Birth: **29/07/1942** *Nationality:* **CANADIAN**
Occupation: **HYDROLOGIST**

Authorisation

Authenticated

This form was authorised by one of the following:

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