

AR01 (ef)

Annual Return



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14/03/2016

Company Name:

LPNS LIMITED

Company Number:

02719478

Date of this return:

28/02/2016

SIC codes:

74990

Company Type:

Private company limited by shares

Situation of Registered

Office:

CAVENDISH HOUSE LAKPUR COURT STAFFORDSHIRE TECHNOLOGY PARK

STAFFORD

UNITED KINGDOM

ST18 0FX

Officers of the company

Company Director	1
Type:	Person
Full forename(s):	MR DAVID
Surname:	COLLISON
Former names:	
Torner names.	
Service Address recorded	l as Company's registered office
Country/State Usually Re	sident: ENGLAND
Date of Birth: **/04/1950	Nationality: BRITISH
Occupation: COMPANY	DIRECTOR

Company Director 2

Type: Person

Full forename(s): MR JOHN HENRY

Surname: WHITEHEAD

Former names:

Service Address: BEACONSFIELD HOUSE BEACONSFIELD ROAD

HATFIELD

HERTFORDSHIRE UNITED KINGDOM

m AL10~8HU

Country/State Usually Resident: UNITED KINGDOM

Date of Birth: **/04/1964 Nationality: BRITISH

Occupation: ACCOUNTANT

Statement of Capital (Share Capital)

Class of shares	ORDINARY	Number allotted	1000000
Currency	GBP	Aggregate nominal value	1000000
		Amount paid per share	1
		Amount unpaid per share	0

Prescribed particulars

THE SHARES HAVE ATTACHED TO THEM FULL VOTING, DIVIDEND AND CAPITAL DISTRIBUTION (INCLUDING ON WINDING UP) RIGHTS; THEY DO NOT CONFER ANY RIGHTS OF REDEMPTION.

Statem	nent of Capita	l (Totals)		
Currency	GBP	Total number of shares	1000000	
		Total aggregate nominal value	1000000	

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 28/02/2016 or that had ceased to be shareholders since the made up date of the previous Annual Return

A full list of shareholders for the company are shown below

Shareholding 1 : 1000000 ORDINARY shares held as at the date of this return

Name: NESTOR HEALTHCARE GROUP LIMITED

Authorisation

Authenticated

This form was authorised by one of the following:

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