

## COMPANIES HOUSE

THE REGISTRAR OF COMPANIES COMPANIES HOUSE CROWN WAY CARDIFF

A03 \*A3X1JI6I\* 518

This form should be completed in black.

CF4 3UZ

The information printed below is taken from Companies House records as at 16/06/99 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
310	0 16	919

#### 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.

#### Registered Office (See note 3)

This is the address registered by Companies House.

10/12 EAST PARADE LEEDS LS1 2AJ

## Principal business activities (See note 4)

Trade classification is
7499 NON-TRADING COMPANY

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



# Annual Return

of company	number	0272790	7	P
company n MANOR HOU BRIDGE) I	JSE NURSI	NG HOME	(STAMFORD	
company ty PRIVATE (		IMITED B	Y SHARES	
show the d	ate here. F d to Comp	Please note	p to an earlice that the for se within 28	m must
	Day I	Month Ye	ar	
	Day A	Month Ye	ar	
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	<del></del>		<b> </b>	

02727907 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	
Company Secretary (See note 7)  Particulars of a new secretary must be notified on form 288.  GEOFFREY KILBURN 57 MUNCASTERGATE YORK NORTH YORKSHIRE Y03 9JX	Day Month Year  Date of any change.
If this person has ceased to be secretary, please state when.	Day Month Year  1     Date of resignation.
Directors (See note 7)	_
Particulars of a new director must be notified on form 288.	Day Month Year  Date of any change.
ANTHONY HECTOR CROW GRAY FLAT 1 17 OTLEY ROAD HARROGATE NORTH YORKSHIRE HG2 ODJ	
Date of Birth:- 14/04/40 Nat:BRITISH Occ:NURSING HOME PROPRIETOR	······································
If this person has ceased to be director, please state when.	Day Month Year  Date of resignation.
Show any relevant current and previous directorships.	

02727907 .	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			
Tarrisanars.	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.				
	Day Month Year			
Particulars.	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			

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02727907 Issued Share Capital (See note 8)	Class (eg Ordinary/ Preference etc)	Number of shares issued	Aggregate nominal value	
Enter details of all shares in issue at the date of this return.			issued multiplied by nominal value per share)	
	ORDINARY		<u> </u>	
	Totals	2	€2	
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.	There were no	changes in the pe	Please mark the appropriate box. eriod not on on paper	
The last full members list was at 30/06/97	A list of chang	ges is enclosed		
	A full list of m	nembers is enclos	ed	
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.				
Certificate	Signed <sub></sub>	hh A.	Secretary/Director *	
I certify that the information given in this return is true to the best of my knowledge and belief.	Date 16	7/99	*(delete as appropriate)	
I enclose the fee of £15.		cludes O		
Cheques should be made payable to Companies House.		enter number) sure that you ns on this pa	have completed	
	DEWITTE	« TOJCHE		
To whom should Companies House direct any enquiries about the information shown in this	10-12 6	AST. PARADA	<u> </u>	
return?>				
	***********	Postcode	e LSI 2AJ	

Telephone 0//1 292//24 Ext