



Companies House

— for the record —

Company Name

CYNGOR ALCOHOL INFORMATION 363s Annual Return
SERVICE LIMITED

Company Type

**Private Company Limited By
Guarantee Without Share Capital**

Company Number

2751104

Information extracted from
Companies House records on
1st September 2002

- > Please check the details printed in blue on this statement.
- > If any details are wrong, strike them through and write the correct details in the "Amended details" column.
- > Please use black pen and write in capitals.



A28
COMPANIES HOUSE

0785
26/09/02

Section 1: Company details

Ref: 2751104/15/42

	Current details	Amended details																
> Registered Office Address <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	12 Trinity Square Llandudno Conwy LL30 2RA	Address _____ _____ _____ UK Postcode _ _ _ _ _																
> Register of Members <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Address where the Register is held At Registered Office	Address _____ _____ _____ UK Postcode _ _ _ _ _																
> Register of Debenture Holders <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Not Applicable	Address _____ _____ _____ UK Postcode _ _ _ _ _																
> Principal Business Activities <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	<table border="1"> <thead> <tr> <th>SIC Code</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>8514</td> <td>Other human health activities</td> </tr> </tbody> </table>	SIC Code	Description	8514	Other human health activities	<table border="1"> <thead> <tr> <th>SIC CODE</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> </tbody> </table>	SIC CODE	Description	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
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> <i>Please enter additional principal activity code(s) in "Amended details" column. See notes for guidance for list of activity codes.</i>		_____ _____ _____																

Section 2: Details of Officers of the Company

	Current details	Amended details
<p>> Company Secretary <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i></p> <p><i>Particulars of a new Company Secretary must be notified on form 288.</i></p>	<p>Name Anthony Dickenson WHITE</p> <p>Address Llais Yr Afon Garth Road Glan Conwy Colwyn Bay Clwyd LL28 5TD</p>	<p>Name _____</p> <p><input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.</p> <p>Address _____ _____ _____</p> <p>UK Postcode _ _ _ _ _</p> <p>Date of change _ _ / _ _ / _ _ _ _</p> <p>Date Anthony Dickenson WHITE ceased to be secretary (if applicable) _ _ / _ _ / _ _ _ _</p>
<p>> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i></p> <p><i>Particulars of a new Director must be notified on form 288.</i></p>	<p>Name Paul BRAID</p> <p>Address White Wing 38 Bryn Avenue Old Colwyn Colwyn Bay Conwy LL29 8AH</p> <p>Date of birth 28/06/1934</p> <p>Nationality British</p> <p>Occupation Landlord</p>	<p>Name _____</p> <p><input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.</p> <p>Address _____ _____ _____</p> <p>UK Postcode _ _ _ _ _</p> <p>Date of birth _ _ / _ _ / _ _ _ _</p> <p>Nationality _____</p> <p>Occupation _____</p> <p>Date of change _ _ / _ _ / _ _ _ _</p> <p>Date Paul BRAID ceased to be director (if applicable) _ _ / _ _ / _ _ _ _</p>

	Current details	Amended details
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name Lucille Margaret HUGHES Address Glaslyn Bethel Road Caernarvon Gwynedd LL55 1DU Date of birth 30/09/1934 Nationality British Occupation Retired	Name <input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Lucille Margaret HUGHES ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name Sheila JEFFRIES Address Tyn Y Coed Betws Y Coed Conwy LL24 0BD Date of birth 28/01/1943 Nationality British Occupation Retired Helath Visitor	Name <input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Sheila JEFFRIES ceased to be director (if applicable) _ _ / _ _ / _ _ _ _

	Current details	Amended details
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name Doctor Dafydd Alun JONES M D B SC D P M F R C PSYCH Address Rhianfa Talwrn Llangefni Anglesey Gwynedd LL77 7TB Date of birth 03/07/1930 Nationality British Occupation Psychiatrist	Name <input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Doctor Dafydd Alun JONES M D B SC D P M F R C PSYCH ceased to be director (if applicable) _ _ / _ _ _ _
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name Edward Roland JONES Address 37 Ffordd Bryn Y Bia Llandudno Gwynedd LL30 3AS Date of birth 28/04/1941 Nationality Cymru Occupation Retired	Name <input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Edward Roland JONES ceased to be director (if applicable) _ _ / _ _ _ _

> Director

If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.

Particulars of a new Director must be notified on form 288.

Current details

Name

Robert Cledwyn WILLIAMS

Address

Garnlwyd 72 Upper Garth Road
Bangor
Gwynedd
LL57 2SS

Date of birth 14/01/1936

Nationality British

Occupation Retired

Amended details

Name

☐ Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.

Address

UK Postcode _ _ _ _ _

Date of birth _ _ / _ _ / _ _ _ _

Nationality _ _ _ _ _

Occupation _ _ _ _ _

Date of change _ _ / _ _ / _ _ _ _

Date Robert Cledwyn WILLIAMS
ceased to be director (if applicable)

_ _ / _ _ / _ _ _ _

Amended details

Name _____

☐ Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.

UK Postcode _ _ _ _ _ _ _

Date of birth / /

Nationality _____

Occupation _____

Date of change / /

Date Reverend Evan Roberts
LLOYD-JONES BA BD MTH ceased to
be director (if applicable) _____ / _____ / _____

Name _____

☐ Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.

Address

UK Postcode _ _ _ _ _

Date of birth / /

Nationality _____

Occupation _____

Date of change / /

Date Anne Lloyd ROBERTS DL OBE
ceased to be director (if applicable)

Particulars of a new Director must be notified on form 288.

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Companies House

— for the record —

363s Annual Return Declaration

- > When you have checked all the sections of this form, please complete this page and sign the declaration below.
- > If you want to change the made up date of this annual return, please complete 2 below.

1. Declaration

- ☐ I confirm that the details in this annual return are correct as at the made-up-date (shown at 2 below). I enclose the filing fee of £15.

Signature

[Handwritten Signature]
(Director / Secretary)

Date

24 / 09 / 2002

*This date must not be earlier than the
return date at 2 below*

What to do now

*Complete this page then send the whole of the Annual Return and the
declaration to the address shown at 4 below.*

2. Date of this return

- ☒ This AR is made up to **20/9/2002** If you are making this return up to an earlier date, please give the date here

___ / ___ / ___

Note: The form must be delivered to CH within 28 days of this date

3. Date of next return

- ☐ If you wish to change your next return to a date earlier than **20th September 2003** please give the new date here:

___ / ___ / ___

4. Where to send this form

- ☐ Please return this form to:

Registrar of Companies
Companies House
Crown Way
Cardiff CF14 3UZ

OR

For members of the Hays Document
Exchange service
DX 33050 Cardiff

**Have you enclosed the filing fee with the company number written on the
reverse of the cheque?**

Cheque ☒ Postal Order ☐ Cheque / Postal Order

Number 016364

(Please complete as appropriate)

Contact Address

You do not have to give any contact information below, but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you give will be visible to searchers of the public record.

Contact Name

Telephone number *inc code*

Address

DX number *if applicable*

DX exchange

Postcode
