



Companies House
— for the record —

AR01 (ef)

Annual Return



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Company Name: **HEALTHCARE FACILITIES MANAGEMENT LIMITED**

Company Number: **02806351**

Date of this return: **02/04/2013**

SIC codes: **81100**

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

Situation of Registered Office: **BERESFORD HOUSE
PLUMPTON GREEN
LEWES
EAST SUSSEX
BN8 4EN**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **ROBIN PATRICIA ANTONIA**

Surname: **OBRIEN**

Former names:

Service Address: **BERESFORD HOUSE BERESFORD LANE
PLUMPTON GREEN
LEWES
EAST SUSSEX
BN8 4EN**

Company Director ***1***

Type: **Person**

Full forename(s): **MR MICHAEL ANTHONY**

Surname: **O'BRIEN**

Former names:

Service Address: **BERESFORD HOUSE BERESFORD LANE
PLUMPTON GREEN
LEWES
EAST SUSSEX
BN8 4EN**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **07/09/1950** *Nationality:* **ENGLISH**

Occupation: **COMPANY DIRECTOR**

Company Director 2

Type: **Person**

Full forename(s): **ROBIN PATRICIA ANTONIA**

Surname: **OBRIEN**

Former names:

Service Address: **BERESFORD HOUSE BERESFORD LANE
PLUMPTON GREEN
LEWES
EAST SUSSEX
BN8 4EN**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **03/08/1948** *Nationality:* **BRITISH**

Occupation: **COMPANY DIRECTOR**

Statement of Capital (Share Capital)

Class of shares	ORDINARY	<i>Number allotted</i>	100000
		<i>Aggregate nominal value</i>	100000
<i>Currency</i>	GBP	<i>Amount paid per share</i>	1
		<i>Amount unpaid per share</i>	0
<i>Prescribed particulars</i>			
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Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	100000
		<i>Total aggregate nominal value</i>	100000

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 02/04/2013 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 : **100000 ORDINARY shares held as at the date of this return**
Name: **UNITED HEALTHCARE LTD**

Authorisation

Authenticated

This form was authorised by one of the following:

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