



Please complete in typescript,
or in bold black capitals.

Midland
H.S. 53
006091

363a

Annual Return

Company Number

2883419

Company Name in full

REGAIN - THE TRUST FOR SPORTS TETRAPLEGICS



* F363AD40 *

Date of this return (See note 1)

The information on this return is made up to

Day Month Year

17 12 96

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.

Day Month Year

17 12 97

Registered Office (See note 3)

Show here the address at the date of
this return.

4TH FLOOR

3 CLIFFORD STREET

LONDON

Any change of
registered office
must be notified
on form 287.

Post town

County / Region

Postcode

W1X 1RA

Principal business activities

(See note 4)

Show trade classification code number(s)
for the principal activity or activities.

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

CHARITY CATERING FOR SPORTS TETRAPLEGICS



A14 *AGUWKRB* 685
COMPANIES HOUSE 17/12/96

Form revised March 1995

When you have completed and signed the form please send it to the
Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff
for companies registered in England and Wales

or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland

DX 235 Edinburgh

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Register of members (See note 5)

If the register of members is not kept at the registered office, state here where it is kept.

Post town

County / Region

NABARRO NATHANSON

SOUTH QUAY, VICTORIA QUAYS, WHARF STREET

SHEFFIELD

SOUTH YORKSHIRE

Postcode S2 5SY

Register of Debenture holders

(see note 6)

If there is a register of debenture holders and it is not kept at the registered office, state here where it is kept.

Post town

County / Region

NABARRO NATHANSON

SOUTH QUAY, VICTORIA QUAYS, WHARF STREET

SHEFFIELD

SOUTH YORKSHIRE

Postcode S2 5SY

Company type (See note 7)

Public limited company

Private company limited by shares

Private company limited by guarantee without share capital

Private company limited by shares exempt under section 30

Private company limited by guarantee exempt under section 30

Private unlimited company with share capital

Private unlimited company without share capital

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Please mark the appropriate box

Company Secretary (see notes 1-5)

(Please photocopy this area to provide details of joint secretaries).

Name * Style / Title

Forename(s)

Surname

Previous forename(s)

Previous surname(s)

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

Post town

County / Region

Country

Details of a new company secretary must be notified on form 288a.

*Honours etc

EPS SECRETARIES LIMITED50 STRATTON STREETLONDON

Postcode W1X 6NX

Directors (see notes 1-5)

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a *

Name	* Style / Title	DOCTOR			
	* Honours etc				
		Date of birth	Day 13	Month 01	Year 60
	Forename(s)	STEPHEN CHARLES			
	Surname	DUCKWORTH			
	Previous forename(s)				
	Previous surname(s)				
Address	BERKELEY HOUSE				
	WEST TYTHERLEY				
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post town	SALISBURY			
	County / Region	WILTSHIRE	Postcode	SP5 1NF	
	Country	ENGLAND	Nationality	BRITISH	
Business occupation	MANAGING DIRECTOR				
Other directorships	See attached list				
* Voluntary details.					

Name	* Style / Title	LORD			
	* Honours etc				
		Date of birth	Day 09	Month 03	Year 63
	Forename(s)	IVAR ALEXANDER MICHAEL			
	Surname	MOUNTBATTEN			
	Previous forename(s)				
	Previous surname(s)				
Address	MAYNS PARK				
	BIRDBROOK				
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post town				
	County / Region	ESSEX	Postcode	C09 4BP	
	Country	ENGLAND	Nationality	BRITISH	
Business occupation	LANDOWNER				
Other directorships	None				

Directors (see notes 1-5)

Please list directors in alphabetical order

Details of new directors must be notified on form 288a.

Name	* Style / Title	MR			
	* Honours etc				
		Date of birth	Day 17	Month 04	Year 62
	Forename(s)	JONATHAN			
	Surname	SHALIT			
	Previous forename(s)				
	Previous surname				
Address	2 CHARLEVILLE MANSIONS				
	CHARLEVILLE ROAD				
	Post town	LONDON			
	County / Region		Postcode	W14 9JB	
	Country	ENGLAND			
Nationality	BRITISH				
Business occupation	MARKETING				
Other directorships	None				

Usual residential

address must be given. In the case of a corporation, give the registered or principal office address.

Name	* Style / Title	COMMANDER			
	* Honours etc	OBE			
		Date of birth	Day 11	Month 08	Year 33
	Forename(s)	CHARLES GABRIEL			
	Surname	WYLIE			
	Previous forename(s)				
	Previous surname				
Address	THE WOLERY				
	LODGE HILL, NEWTOWN VILLAGE				
	Post town	FAREHAM			
	County / Region	HAMPSHIRE	Postcode	PO17 6LQ	
	Country	ENGLAND			
Nationality	BRITISH				
Business occupation	RETIRED				
Other directorships	None				

Usual residential

address must be given. In the case of a corporation, give the registered or principal office address.

* Voluntary details.

Other relevant directorships

Company Number

2883419

Company Name

REGAIN - THE TRUST FOR SPORTS TETRAPLEGICS

Directors Name

DOCTOR STEPHEN CHARLES DUCKWORTH

† Directors only.

† Other directorships

DISABILITY MATTERS LIMITED

THE BRIDGE AGENCY LIMITED

NOTES

Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential line.

Give previous forenames or surname(s) except:

- for a married woman, the name by which she was known before marriage need not be given.
- for names not used since the age of 18 or for at least 20 years

A peer or individual known by a title may state the title instead of or in addition to the forenames and surname and need not give the name by which that person was known before he or she adopted the title or preceded to it.

Other directorships.

Give the name of every company incorporated in Great Britain of which the person concerned is a director or has been a director at any time in the past five years.

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

- dormant
- a parent company which wholly owned the company making the return, or
- another wholly owned subsidiary of the same parent company.

Issued share capital (see note 9)
Enter details of all the shares in issue at the date of this return.

Class (e.g. Ordinary/Preference)	Number of shares issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share)
Totals		

List of past and present members
(Use attached schedule where appropriate)
A full list is required if one was not included with either of the last two returns.
(see note 10)

There were no changes in the period

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on paper in another format

A list of changes is enclosed

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A full list of members is enclosed

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Elective resolutions
(Private companies only)
(See note 11)

If at the date of this return an election is in force to dispense with annual general meetings, mark this box

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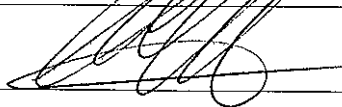
If at the date of this return an election is in force to dispense with laying accounts in general meetings, mark this box

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Certificate

I certify that the information given in this return is true to the best of my knowledge and belief.

Signed



Date

17.12.96

† Please delete as appropriate

† a director/secretary

When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House.

This return includes

continuation sheets.

(enter number)

Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should contact if there is any query.

EPS SECRETARIES LIMITED	
SOUTH QUAY, VICTORIA QUAYS WHARF STREET	
SHEFFIELD S2 5SY	Tel 0114 279 4000
DX number	DX exchange