Companies House

AR01 (ef)

Annual Return

Received for filing in Electronic Format on the: **03/05/2014**

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Company Name:	**DESIGNS ON YOUR COMPANY LIMITED**
Company Number:	**03194580**
Date of this return:	**03/05/2014**
SIC codes:	**70229**
Company Type:	**Private company limited by shares**
Situation of Registered Office:	**1 PRIMROSE CLOSE** **MARKET RASEN** **LINCOLNSHIRE** **LN8 3QX**

Officers of the company

Company Secretary 1

Type: **Person**

Full forename(s): **BARBARA MARY**

Surname: **POSTLES**

Former names:

Service Address: **134 CAULFIELD ROAD**
LONDON
E6 2DG

Company Director 1

Type: **Person**

Full forename(s): **BARBARA MARY**

Surname: **POSTLES**

Former names:

Service Address: **134 CAULFIELD ROAD**
LONDON
E6 2DG

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **17/08/1953** *Nationality:* **BRITISH**

Occupation: **SECRETARY**

Company Director 2

Type: **Person**

Full forename(s): **MR GRAHAM ERIC**

Surname: **POSTLES**

Former names:

Service Address: **134 CAULFIELD ROAD**
EAST HAM
LONDON
E6 2DG

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **21/08/1957** *Nationality:* **BRITISH**

Occupation: **INSURANCE BROKER**

Statement of Capital (Share Capital)

Class of shares	**ORDINARY**	*Number allotted*	**2**
		Aggregate nominal value	**2**
Currency	**GBP**	*Amount paid per share*	**1**
		Amount unpaid per share	**0**

Prescribed particulars

EACH SHARE IS ENTITLED TO ONE VOTE IN ANY CIRCUMSTANCES.

Statement of Capital (Totals)

Currency	**GBP**	*Total number of shares*	**2**
		Total aggregate nominal value	**2**

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 03/05/2014 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 : **1 ORDINARY shares held as at the date of this return**
Name: **GRAHAM ERIC POSTLES**

Shareholding 2 : **1 ORDINARY shares held as at the date of this return**
Name: **BARBARA MARY POSTLES**

Authorisation

Authenticated

This form was authorised by one of the following:

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