

Please complete in typescript, or in bold black capitals.

NatWest

170864 £180 ×12

363a

Annual Return

Community Nurse Defence Limited

Company Number

3252834

Company Name in full



* F363AD40 *

Date of this return (See note 1) The information in this return is made up to

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
20	09	1998

Day	Month	Year		
20	09	1999		

Registered Office(See note 3)
Show here the address at the date of this return.

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

Post town

County / Region

Postcode

3 DEVONSHIRE PLACE	
LONDON	
W1N 2EA	

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.

			
	<u>L</u>		
DORMANT			



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

Register of	f men	nbers (See note 5)		<u> </u>			
If the register of members is not kent at the							
registered office, state here where it is kept.							
Post tow			n				
		County / Region	n			Postcod	e
							
Register of (See note 6) If there is a register and it is not kept a state here where i	er of deb	distered office					
		Post town	1				
		County / Region	1			Postcode	
Company ty	/pe (Se	ee note 7)					
Public limited compa	ny						
Private company limit	ed by sha	ares					
Private company limit share capital			X				
Private company limited by shares exempt under section 30		ares exempt under	Please mark the appropriate box				
Private company limite under section 30	ed by gua	rantee exempt				appropriate be	,^
Private unlimited com	pany with	share capital					
Private unlimited comp	pany with	out share capital					
Company Se		ary(see notes 1-5)	Details of a new co	mpany	/ secretary	must be notif	ied on form 288a.
this area to provide details of joint	Name	* Style / Title	MR			*Honours etc	
secretaries).		Forename(s)	NICHOLAS JOHN				
Voluntary details. Previous forename(s) Previous surname(s)		Surname	BOWMAN				
	Addres	ss	16 MANOR DRIVE				
Jsual residentia							
address must be liven. In the case of a Post town orporation, give the egistered or principal ffice address. Country		AVA FOR ITY					
		Post town	AYLESBURY				
		County / Region	BUCKS			Postcode	HP20 1EW
		Country	ENGLAND				

Directors (see notes 1 to 5)			Details of new directors must be	notified on form	288a			
Please list directors in alphabetical order. Name * Style / Title			DR					
	7441110	•		i	Day	Month	Year	
		* Honours etc	MBBS MRCS LRCP DOBSTRCOG	Date of birth	25	04	1949	
		Forename(s)	MICHAEL THOMAS					
		Surname	SAUNDERS				·	
	Pr€	evious forename(s)						
	Pr	evious surname(s)						
	Addres	s	317 ANDOVER ROAD					
Usual resider address must								
given. In the cas	se of a	Post town	NEWBURY					
corporation, giv registered or pro office address.	e tne incipal	County / Region	BERKSHIRE	Postcode	RG20 0LN			
		Country	ENGLAND	Nationality	BRITIS	H		
	Busines	ss occupation	CHIEF EXECUTIVE					
	Other d	irectorships						
* Voluntary details.								
								
		1						
	Name	* Style / Title		-	Day	Month	Year	
		* Honours etc		Date of birth				
		Forename(s)						
		Surname						
	Pre	vious forename(s)						
	Pre	evious surname(s)						
Address								
Usual residential		į. [
address must be given. In the cas	e of a	Post town						
corporation, give registered or prin	ncipal	i. [
office address.		County / Region		Postcode				
Country Business occupation Other directorships		Country [Nationality				
		s occupation		·				
		rectorships						
		ſ						

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	There were no changes i	n the period			
returns. (see note 10)	on paper in another format				
	A list of changes is enclosed	sed			
	A full list of members is e	enclosed			
Elective resolutions (Private companies only) (See note 11)	If at the date of this return	n an election is in force annual general meetin			
	If at the date of this return laying accor	າ an election is in force unts in general meeting			
Certificate	I certify that the information knowledge and belief.	on given in this return is	s true to the best of my		
Signed	NoBownan	. Dat	e 28.9.98		
† 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	This return includes	(enter number)	ontinuation sheets.		
Companies House.		·			
Please give the name, address, telephone number, and if available, a DX number and Exchange, for	MRS S E BLOXHAM, 3 DEVONSHII	RE PLACE, LONDON, W1N 2EA			
the person Companies House should contact if there is any query.		Tel 0171 467 3167			
	DX number	DX exchange			