



**Companies House**  
— for the record —

**AR01** (ef)

**Annual Return**



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**X2IB01SZ**

*Company Name:* **THE SPOTTED PONY BREED SOCIETY (GREAT BRITAIN)**

*Company Number:* **03259238**

*Date of this return:* **01/10/2013**

*SIC codes:* **01629**

*Company Type:* **Private company limited by guarantee exempt under section 60**

*Situation of Registered Office:* **THE TOWER HOUSE  
PRIORY ROAD DODFORD  
NR BROMSGROVE  
WORCESTERSHIRE  
B61 9DF**

**Officers of the company**

## *Company Secretary 1*

*Type:* **Person**  
*Full forename(s):* **MR CHRISTOPHER WILLIAM**

*Surname:* **JENNINGS**

*Former names:*

*Service Address:* **THE TOWER HOUSE PRIORY ROAD  
DODFORD  
BROMSGROVE  
WORCESTERSHIRE  
B61 9DF**

*Company Director*    **1**

*Type:*                      **Person**

*Full forename(s):*        **ROSEMARY MERCY**

*Surname:*                **BANNISTER**

*Former names:*

*Service Address:*        **1 ST MARTINS CLOSE  
BARFORD ST MARTIN  
SALISBURY  
WILTSHIRE  
SP3 4AX**

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

*Date of Birth:*    **25/03/1937**                      *Nationality:*    **BRITISH**

*Occupation:*    **HOUSEWIFE**

*Company Director*    **2**

*Type:*                                **Person**  
*Full forename(s):*                **MR CHRISTOPHER WILLIAM**

*Surname:*                           **JENNINGS**

*Former names:*

*Service Address:*                **THE TOWER HOUSE PRIORY ROAD  
DODFORD  
BROMSGROVE  
WORCESTERSHIRE  
B61 9DF**

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

*Date of Birth:*   **07/09/1933**                                *Nationality:*   **BRITISH**

*Occupation:*    **RETIRED CHARTERED  
SURVEYOR**

*Company Director* 3

*Type:* **Person**  
*Full forename(s):* **DR JENNIFER CATHERINE TERRY**

*Surname:* **VERITY**

*Former names:*

*Service Address:* **FLEETWOOD  
COW LANE KIMPTON  
ANDOVER  
SP11 8NY**

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

*Date of Birth:* **23/05/1947** *Nationality:* **BRITISH**  
*Occupation:* **MEDICAL PRACTITIONER**

*Authorisation*

*Authenticated*

*This form was authorised by one of the following:*

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