

8513 OTHER HEALTH
ACTIVITIES

Section 2: Details of Officers of the Company

	Current details	Amended details
> Company Secretary If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. Particulars of a new Company Secretary must be notified on form 288.	Name Doctor Graham Hugh CURTIS JENKINS MA FRCGP Address 38 Richmond Road Staines Middlesex TW18 2AB	Name Address UK Postcode _ _ _ _ _ Date of change _ _ / _ _ / _ _ _ _ Date Doctor Graham Hugh CURTIS JENKINS MA FRCGP ceased to be secretary (if applicable) _ _
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. Particulars of a new Director must be notified on form 288.	Name Susan BOND Address Smithy House Priest Weston Montgomery Powys SY15 6DE Date of birth 21/03/1945 Nationality British Occupation Psychotherapist	Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Susan BOND ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. Particulars of a new Director must be notified on form 288.	Name Patricia Joan FOSTER Address Danehurst Cottage 95 Hewarts Lane Bognor Regis West Sussex PO21 3DJ Date of birth 19/07/1950 Nationality British Occupation Counsellor	Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Patricia Joan FOSTER ceased to be director (if applicable) _ _ / _ _ / _ _ _ _

	Current details	Amended details
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Name Dr Glyn HUDSON-ALLEZ C PSYCHOL Address 28 Brins Close Stoke Gifford Bristol BS34 8XU Date of birth 02/04/1950 Nationality British Occupation Consultant Psychologist	Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Dr Glyn HUDSON-ALLEZ C PSYCHOL ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
<i>Particulars of a new Director must be notified on form 288.</i>		
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Name Susan Jayne IREMONGER Address Strangford House 5 Downs View Close North Chailey Lewes East Sussex BN8 4HA Date of birth 03/10/1961 Nationality British Occupation Counsellor	Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Susan Jayne IREMONGER ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
<i>Particulars of a new Director must be notified on form 288.</i>		
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Name Elisabeth KATIS Address 35 Oakhill Road Sheffield S7 1SJ Date of birth 18/02/1956 Nationality British Occupation Psychotherapist	Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Elisabeth KATIS ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
<i>Particulars of a new Director must be notified on form 288.</i>		

		Current details	Amended details
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.		Name Gillian Margaret LOBB	Name _____
		Address 62 Ivy Road St Denys Southampton SO17 2JN	Address _____ _____ _____
	Date of birth 10/10/1944	UK Postcode _____ Date of birth ____ / ____ / ____ Nationality _____ Occupation _____ Date of change ____ / ____ / ____ Date Gillian Margaret LOBB ceased to be director (if applicable) ____ / ____ / ____	
Particulars of a new Director must be notified on form 288.	Nationality British Occupation Counsellor/Trainer		
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.		Name Antonia MURPHY BA DIP	Name _____
		Address 38 Leonard Avenue Sherwood Nottingham NG5 2LU	Address _____ _____ _____
	Date of birth 12/06/1956	UK Postcode _____ Date of birth ____ / ____ / ____ Nationality _____ Occupation _____ Date of change ____ / ____ / ____ Date Antonia MURPHY BA DIP ceased to be director (if applicable) ____ / ____ / ____	
Particulars of a new Director must be notified on form 288.	Nationality British Occupation Counsellor/Co-Ordinator		
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.		Name Lisa ROBINSON DIP SOC ADM CQSW	Name _____
		Address 27 De Freville Avenue Cambridge CB4 1HW	Address _____ _____ _____
	Date of birth 20/02/1944	UK Postcode _____ Date of birth ____ / ____ / ____ Nationality _____ Occupation _____ Date of change ____ / ____ / ____ Date Lisa ROBINSON DIP SOC ADM CQSW ceased to be director (if applicable) ____ / ____ / ____	
Particulars of a new Director must be notified on form 288.	Nationality British Occupation Counsellor		

> Director

If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.

Current details

Name
Peter John THOMAS

Address
10 Blythe Hill
St Pauls Cray
Orpington
Kent
BR5 2RR

Date of birth 29/07/1957

Nationality British

Occupation Psychologist

Amended details

Name

Address

UK Postcode _ _ _ _ _

Date of birth _ _ / _ _ / _ _ _ _

Nationality _ _ _ _ _

Occupation _ _ _ _ _

Date of change _ _ / _ _ / _ _ _ _

Date Peter John THOMAS ceased to be director (if applicable)

_ _ / _ _ / _ _ _ _

Particulars of a new Director must be notified on form 288.



Companies House
— for the record —

363s Annual Return Declaration

- > When you have checked all the sections of this form, please complete this page and tick and sign the declaration below.
- > If you want to change the made up date of this annual return, please complete 2 below.

1. Declaration

- ☐ I confirm that the details in this annual return are correct as at the made-up-date (shown at 2 below). I enclose the filing fee of £15.

Signature

(Director / Secretary)

Date

13 / 12 / 1999

*This date must not be earlier than the
return date at 2 below*

What to do now

*Please detach and retain the covering letter, complete this page then send the
whole of the Annual Return and the declaration to the address shown at 4 below.*

2. Date of this return

- ☒ This AR is made up to
9/12/1999

If you are making this return up to an earlier date,
please give the date here

— / — / —

Note: The form must be delivered to CH within 28 days of this date

3. Date of next return

- ☐ If you wish to change your next return to a date earlier than **9th December 2000**
please give the new date here:

— / — / —

4. Where to send this form

- ☐ Please return this form to:
Registrar of Companies
Companies House
Crown Way
Cardiff CF14 3UZ

**Have you enclosed the filing fee with the company number written on the
reverse of the cheque?**

Cheque

☒ Postal Order☐

Cheque / Postal Order

Number

100334

(Please complete as appropriate)

Contact Address

Please give the name and address of the person who should be contacted if
there are any queries about this form.

Contact Name

R. SWAFFIELD

Telephone number inc code

01243 287751

Address

EVANS WEIR

Chartered Accountants

The Victoria

25 St. Pancras

Chichester PO19 4LT

DX number if applicable

DX exchange

Postcode