



Companies House

— for the record —

Company Name

**COTSWOLD VIEW RESIDENTS
ASSOCIATION LIMITED**

363s Annual Return

Company Type

**Private Company Limited By
Guarantee Without Share Capital**

Company Number

3876157

Information extracted from
Companies House records on
26th October 2001

- > Please check the details printed in blue on this statement.
- > If any details are wrong, strike them through and write the correct details in the "Amended details" column.
- > Please use black pen and write in capitals.



Section 1: Company details

Ref: 3876157/15/42

	Current details	Amended details																		
> Registered Office Address <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Holland Court The Close Norwich Norfolk NR1 4DX	Address _____ _____ _____ UK Postcode _ _ _ _ _																		
> Register of Members <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Address where the Register is held At Registered Office	Address _____ _____ _____ UK Postcode _ _ _ _ _																		
> Register of Debenture Holders <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Not Applicable	Address _____ _____ _____ UK Postcode _ _ _ _ _																		
> Principal Business Activities <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	<table border="1"> <thead> <tr> <th>SIC Code</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>9600</td> <td>Residents property management</td> </tr> </tbody> </table>	SIC Code	Description	9600	Residents property management	<table border="1"> <thead> <tr> <th>SIC CODE</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>9600</td> <td>_____</td> </tr> <tr> <td>9999</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> </tbody> </table>	SIC CODE	Description	9600	_____	9999	_____	_____	_____	_____	_____	_____	_____	_____	_____
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> Please enter additional principal activity code(s) in "Amended details" column. See notes for guidance for list of activity codes.																				

Section 2: Details of Officers of the Company

	Current details	Amended details
> Company Secretary <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> <i>Particulars of a new Company Secretary must be notified on form 288.</i>	Name Emma Rachel FELTHAM Address 15 Greenacres Melton Park Gardens Little Melton Norwich Norfolk NR9 3QU	Name Address UK Postcode _ _ _ _ _ Date of change _ _ / _ _ / _ _ _ _ Date Emma Rachel FELTHAM ceased to be secretary (if applicable) _ _ / _ _ / _ _ _ _
> 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> <i>Particulars of a new Director must be notified on form 288.</i>	Name Sheila Ann COLEMAN Address The Hawthorns Mill Road Barnham Broom Norwich Norfolk NR9 4DE Date of birth 02/09/1948 Nationality British Occupation Solicitor	Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Sheila Ann COLEMAN ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
> 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> <i>Particulars of a new Director must be notified on form 288.</i>	Name Bryan Fred GILLERY Address 40 Thunder Lane Thorpe St Andrew Norwich Norfolk NR7 0PX Date of birth 07/09/1951 Nationality British Occupation Solicitor	Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Bryan Fred GILLERY 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.

Current details

Name
David John ROBERTS

Address
27 York Street
Norwich
Norfolk
NR2 2AN

Date of birth 19/02/1964

Nationality British

Occupation Solicitor

Amended details

Name

Address

UK Postcode _ _ _ _ _

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

Nationality _ _ _ _ _

Occupation _ _ _ _ _

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

Date David John ROBERTS ceased to be director (if applicable)

_ _ / _ _ / _ _ _ _



Companies House

— for the record —

363s Annual Return Declaration

- > When you have checked all the sections of this form, please complete this page 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

[Signature]
(Director / Secretary)

Date 12 / 11 / 2001

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

What to do now

*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 **12/11/2001** 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 **12th November 2002** 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

OR

For members of the Hays Document
Exchange service
DX 33050 Cardiff

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

Cheque ☒ Postal Order ☐

Cheque / Postal Order
Number _____

(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

POOLEY M

Telephone number inc code

01603 272659

Address

EVERSHEDS

DX number if applicable

5206

HOLLAND COURT

DX exchange

THE CLOSE NORWICH

NORWICH

Postcode

NEL 4AX