



Companies House

AR01 (ef)

Annual Return



X3LUIRA0

Received for filing in Electronic Format on the: **01/12/2014**

Company Name: **THE CORNELIUS CENTRE FOR PEOPLE WITH LEARNING
DISABILITIES LTD**

Company Number: **04603724**

Date of this return: **28/11/2014**

SIC codes: **96090**

Company Type: **Private company limited by guarantee**

*Situation of Registered
Office:* **9 STRATFIELD PARK, ELETTRA
AVENUE, WATERLOOVILLE
HAMPSHIRE
PO7 7XN**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **MRS KAREN**

Surname: **PETT**

Former names:

Service Address: **2 SPRINGVALE RIDGE COMMON LANE
STROUD
PETERSFIELD
HAMPSHIRE
ENGLAND
GU32 1AX**

Company Director **1**

Type: **Person**

Full forename(s): **VIVIEN NITA**

Surname: **FORD**

Former names:

Service Address: **6 COPSEY CLOSE
DRAYTON
PORTSMOUTH
HANTS
PO6 1NT**

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

Date of Birth: **17/09/1937** *Nationality:* **BRITISH**

Occupation: **RETIRED**

Company Director **2**

Type: **Person**
Full forename(s): **PAMELA**

Surname: **HOLDAWAY**

Former names: **WHITE**

Service Address: **2 NEW ROAD
FRATTON
PORTSMOUTH
HANTS
ENGLAND
PO2 7RB**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **05/11/1950** *Nationality:* **BRITISH**
Occupation: **RETIRED**

Company Director **3**

Type: **Person**

Full forename(s): **KAREN**

Surname: **PETT**

Former names: **FERGUSSON**

Service Address: **2 NEW ROAD
FRATTON
PORTSMOUTH
HANTS
ENGLAND
PO2 7RB**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **10/09/1956**

Nationality: **BRITISH**

Occupation: **NONE**

Company Director 4

Type: **Person**
Full forename(s): **RUSSELL**

Surname: **TAPPENDEN**

Former names:

Service Address: **24 WYMERING ROAD
PORTSMOUTH
HAMPSHIRE
PO2 7HY**

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

Date of Birth: **09/03/1961** *Nationality:* **BRITISH**

Occupation: **TYREFITTER**

Company Director **5**

Type: **Person**

Full forename(s): **JENNIFER**

Surname: **WHITE**

Former names:

Service Address: **11 ALDSWORTH GARDENS
DRAYTON
PORTSMOUTH
HAMPSHIRE
PO6 1QS**

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

Date of Birth: **20/04/1950**

Nationality: **BRITISH**

Occupation: **RETIRED**

Authorisation

Authenticated

This form was authorised by one of the following:

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