

AR01 (ef)

Annual Return



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Company Name: ASSOCIATED BODYSHOP FACTORS LIMITED

Company Number: 05098842

Date of this return: **08/04/2013**

SIC codes: **66190**

Company Type: Private company limited by shares

Situation of Registered

Office:

P R SCULLY & CO SOLICITORS CROSS HOUSE SUTTON ROAD

ST HELENS WA9 3DR

Officers of the company

Company Secretary	1
Type:	Person
Full forename(s):	MR ALASDAIR JAMES
Surname:	BROWN
Former names:	
Service Address:	12 RIVERSIDE DRIVE
	FLIXTON MANCHESTER
	M41 9FL

Company Director Type: Full forename(s):	<pre>Person MR ALASDAIR JAMES</pre>			
Surname:	BROWN			
Former names:				
Service Address:	12 RIVERSIDE DRIVE FLIXTON MANCHESTER M41 9FL			
Country/State Usually Resident: UNITED KINGDOM				
Date of Birth: 13/08/1966 Occupation: SOLICITO				

Company Director 2

Type: Person

Full forename(s): PATRICIA

Surname: SCULLY

Former names:

Service Address: 9 HEALEY GROVE

WHITWORTH ROCHDALE LANCASHIRE OL12 8RX

Country/State Usually Resident: UNITED KINGDOM

Date of Birth: 05/10/1965 Nationality: BRITISH

Occupation: SOLICITOR

Statement of Capital (Share Capital)

Class of shares Currency	ORDINARY GBP	Number allotted Aggregate nominal value Amount paid per share Amount unpaid per share	100 100 1 0
Prescribed partic			

Statem	ent of Capit	al (Totals)		
Currency	GBP	Total number of shares	100	
		Total aggregate nominal value	100	

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 08/04/2013 or that had ceased to be shareholders since the made up date of the previous Annual Return

A full list of shareholders for the company are shown below

Shareholding 1 : 51 ORDINARY shares held as at the date of this return

Name: PATRICIA R SCULLY

Shareholding 2 : 49 ORDINARY shares held as at the date of this return

Name: ALASDAIR J BROWN

Authorisation

Authenticated

This form was authorised by one of the following:

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