

000332 / 30

363a

Please complete in typescript, or in bold black capitals.

## Annual Return

CHFP000

Company number  
Company name in full

05398983  
RESPONSE PHYSIOTHERAPY  
LIMITED

### Date of this return

The information in this return is made up to

Day Month Year

1 9 / 10 3 / 12 0 0 9

### Date of next return

If you wish to make your next return to a date earlier than the anniversary of this return please show that date here. Companies House will then send a form at the appropriate time.

Day Month Year

/ / / / /

### Registered Office

Show here the address at the date of this return

Any change of registered office must be notified on form 287

Post town  
County/Region

UK Postcode

MARSHALL SMALLEY CHARTERED CERTIFIED ACCOUNTANTS  
UNIT 15 CARLTON BUSINESS CENTRE  
NOTTINGHAM  
NOTTINGHAMSHIRE  
N G 4 L 3 A A

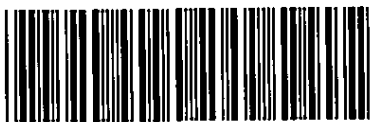
### Principal business activities

Show trade classification code number(s) for the principal activity or activities

If the code number cannot be determined, give a brief description of principal activity

9304

THURSDAY



\*AWIHT9GN\*

A28

30/04/2009

COMPANIES HOUSE

109

When you have completed and signed the form please send it to the registrar of Companies at:  
Companies House, Crown Way, Cardiff, CF14 3UZ  
companies registered in England or Wales or  
Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB  
For companies registered in Scotland

DX 33050 Cardiff

DX ED235 Edinburgh 1  
or LP-4 Edinburgh 2

**Register of members**

If the register of members is not kept at the registered office, state here where it is kept

Post town

County/Region

UK Postcode

**Register of Debenture holders**

If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state here where it is kept

Post town

County/Region

UK Postcode

**Company type**

Public limited company

Private company limited by shares

Private company limited by guarantee without share capital

Private company limited by shares exempt under section 30

Private company limited by guarantee exempt under section 30

Private unlimited company with share capital

Private unlimited company without share capital

Please tick the appropriate box

**Company Secretary**

Details of a new company secretary must be notified on form 288a

\* Voluntary details  
(Please photocopy this area to provide details of joint secretaries).

Name

\*Style/Title

Forename(s)

Surname

Address ††

†† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

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Post town

County/Region

UK Postcode

Country

If a partnership, give the names and addresses of the partners or the name of the partnership and office address

**Directors**

Please list the directors in alphabetical order

Details of new directors must be notified on form 288a

\* Voluntary details

In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name

Name \*Style/Title MR

Day Month Year

Date of birth 2 9 / 10 6 / 11 9 7 15

Forename(s) MATTHEW JOHN

Surname TAYLOR

Address ☐ ELDERBERRY COTTAGE, ORSTON LANE  
FLAWBOROUGH

Post town NOTTINGHAM

County/Region NOTTINGHAMSHIRE

UK Postcode N G 1 B 9 P 1A

Country UK

Nationality BRITISH

Business occupation PHYSIOTHERAPIST

†† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

**Directors**

Please list the directors in alphabetical order

Details of new directors must be notified on form 288a

\* Voluntary details

In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name

Name \*Style/Title \_\_\_\_\_

Day Month Year

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

Forename(s) \_\_\_\_\_

Surname \_\_\_\_\_

Address ☐ \_\_\_\_\_

Post town \_\_\_\_\_

County/Region \_\_\_\_\_

UK Postcode \_\_\_\_\_

Country \_\_\_\_\_

Nationality \_\_\_\_\_

Business occupation \_\_\_\_\_

†† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

**Issue share capital**

Enter details of all the shares in issue at the date of this return

Class (e.g. Ordinary/Preference)

Number of shares Issued

Aggregate Nominal Value

(i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)

Ordinary £1	100	£100
<b>Totals</b>	100	£100

**Traded public companies**

A traded public company means a company any of whose shares are shares admitted to trading on a regulated market

Please tick this box if your company was a traded public company at any time during the period of this return

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**List of past and present shareholders**

(use attached schedule where appropriate)

Please tick the appropriate box below:

On paper

In another format

Private or non-traded public companies are required to provide a "full list" if one was not included with either of the last two returns.

A full list of shareholders for a private or non-traded public company is enclosed. **Please complete Schedule A.**

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Traded public companies are required to provide a list of shareholders who held at least 5% of the issued shares of any share class if a list was not provided with either of the last two returns.

A list of shareholders holding at least 5% of the issued shares of any share class for a traded public company is enclosed. **Please complete Schedule B.**

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A list containing shareholder changes is enclosed

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→ For private or non-traded public companies, **please complete Schedule A**

→ For traded public companies, **please complete Schedule B**

There were no shareholder changes in this period

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**Certificate**

I certify that the information given in this return is true to the best of my knowledge and belief

Signed

*[Signature]*

Date

27.04.2020

\* Please delete as appropriate

When you have signed the return, send it with the fee to the Registrar of Companies. Make cheques payable to Companies House.

\*(director / secretary)

This return includes

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continuation sheets

(enter number)

You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you give will be visible to searchers of the public record.

DX number

DX exchange