

# 363a

103141/30

Please complete in typescript, or in bold black capitals.

Company Number | 5455468

**Annual Return** 

CHFP010

Company Name in full |

MAYFLOWER	HOSPITALS	LIMITED

#### Date of this return

The information in this return is made up

•	Month	Year		
1 L 8	0 5	2 0 0 8		

#### Date of next return

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

Day	Month	Year		
L_		L	_	

1 LUMLEY STREET, MAYFAIR

## **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 | W1K 6TT

LONDON

### 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

7499	
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30/05/2008 COMPANIES HOUSE

When you have completed and signed the form please send it to the Registrar of Companies at

Companies House, Crown Way, Cardiff, CF14 3UZ

for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh

DX 33050 Cardiff

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 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  (Please photocopy this area to provide details of joint secretaries)  * Volvittes details  Forename(s)	Details of a new company secretary must be notified on form 288a
* Voluntary details  If a partnership give the names and addresses of the partners or the name of the partnership and office address	JD SECRETARIAT LIMITED  1 LUMLEY STREET, MAYFAIR
Usual residential address must be given in the case of a corporation, give the registered or principal office address  Usual residential Post town County / Region Country	

BLUEPRINT 2000

Directors Please list directors in a	alphabetical order	Details of new directors must be notified on form 288a
N	lame * Style / Title	
Directors In the case of a director that is a corporate or a Scottish firm,	Date of birth	Day Month Year
the name is the corporate or firm	Forename(s) Surname	LUMLEY MANAGEMENT LIMITED
name	Address	1 LUMLEY STREET, MAYFAIR
Usual residential address must be		
given In the case of a corporation,	Post town	LONDON
give the registered or principal office	County / Region	UK Postcode W1K 6TT
address	Country	Nationality
	Business occupation	
* Voluntary details		
•	lame * Style / Title	L
<b>Directors</b> In the case of a director that is a corporate	Date of birth	Day Month Year
or a Scottish firm, the name is the	Forename(s)	
corporate or firm name	Surname	
	Address	
Usual residential address must be given In the case	Post town	1
of a corporation, give the registered	County / Region	
or principal office address	Country	
	Business occupation	

Issued 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		2	£2 00			
1	-	I				
<u></u>		<u></u>	_			
	Totals	2	2 00			
List of past and present shareh	nolders		_			
(use attached schedule where appropriate) A full list is required if one was not included with either of the last two	There were no change	s in the period on par	per in another format			
returns	A list of changes is end	A list of changes is enclosed				
	A full list of shareholde	ers is enclosed X				
Certificate	I certify that the inform knowledge and belief	ation given in this return	is true to the best of my			
Sign † Please delete as appropriate	ed a director secretary	FOR AND ON BEH Da	23/05/08 COMPANY			
When you have signed the return send with the fee to the Registrar of Companies Cheques should be made payable to Companies House	It This return ind	cludes 1 (enter number)	continuation sheets			
Please give the name, address, telepho	ne JEFFCOTE DONNISC	ON LLP, 5TH FLOOR,	1 LUMLEY STREET,			
number and, if available, a DX number and Exchange of the person Companies	s   LONDON, W1K 6TT					
House should contact if there is any que		Tel. 020 7399 Tel Fax 020 7408				
BILLEPRINT	DY number I	DX evchange I				



# List of past and present shareholders Schedule to form 363a

CHFP010

**Company Number** | 5455468

Company Name in full | MAYFLOWER HOSPITALS LIMITED

- Changes to shareholders particulars or details of the amount of stock or shares transferred must be completed each year
- You must provide a "full list" of all the company shareholders on
  - The company's first annual return following the incorporation,
  - Every third annual return after a full list has been provided
- List the company shareholders in alphabetical order or provide an index
- List joint shareholders consecutively

	Shares or amount of stock transferred (if appropriate)			
Shareholders' details	Class and number of shares or amount of stock held		Date of registration of transfer	
Name JD SECRETARIAT LIMITED	£1 00 Ordinary			
Address 1 LUMLEY STREET, MAYFAIR, LONDON				
UK postcode [ W1K 6TT	Shares Held			
Name LUMLEY MANAGEMENT LIMITED	£1 00 Ordinary			
Address 1 LUMLEY STREET, MAYFAIR, LONDON				
	Shares Held			
UK postcode W1K 6TT				
Name				
Address				
UK postcode	—			