

Please complete in typescript, or in bold black capitals.

Annual Return

CHFP000

Company number

Company name in full

WILLIAMS BULDERS LIMITED

Date of this return

The information in this return is made up to

Month 124,111012008

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.

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

BARN OWLS.

Month

Day

EAST TOWN LANE

ILTON

COMERSET

UK Postcode

IL IN IX

Principal business activities

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



A05

03/02/2009

156

COMPANIES HOUSE

*AGSAI6Q6

A43

22/01/2009 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 or Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX ED235 Edinburgh 1

or LP-4 Edinburgh 2

DX 33050 Cardiff

For companies registered in Scotland

Page 1

10/08

| Register of members If the register of members is no registered office, state here wh | ot kept at the nere it is kept | L | | | | | | |
|--|---|------------------|------------|--------|--------|---------------------------------------|--|--|
| | Post town | | | | | | | |
| C | County/Region | L | | | | | | |
| | UK Postcode | <u></u> _ | _ | | | <u> </u> | | |
| | | | | | | | | |
| Register of Debenture If there is a register of debent duplicate of any such register is not kept at the registered of | ure holders, or a or part of it, which | L | | | | | | |
| where it Is kept | Post town | | <u> </u> | | | | | |
| | County/Region | | | | | | | |
| | UK Postcode | | _ L | L | | | | |
| Company type | | | | | | | | |
| Public limited company | | | | | | | | |
| Private company limited | d by shares | | X | | | | | |
| Private company limited share capital | d by guarantee with | out | | | | | | |
| Private company limited section 30 Private company limited under section 30 | | | | | | Please tick the appropriate box | | |
| Private unlimited compa | any with share capi | tal | | | · | | | |
| Private unlimited compa | any without share o | apital | | | | | | |
| Company Secretary | | Detai | ls of a ne | w comp | any se | cretary must be notified on form 288a | | |
| * Voluntary details (Please photocopy Na | me *Style/Title | . 1 | 1R3 | | | | | |
| this area to provide details of joint secretaries). | _ | _ | | KAR | FN |) | | |
| tt Tick the box if the | • | | | | | | | |
| address shown is a service address for the | | _ | | | | | | |
| beneficiary of a Confidentiality Order | Address † | | | | | 1.00 11 | | |
| granted under section 723B of the Companies Act 1985. Otherwise, | | | | | | | | |
| give your usual residential address. In | | Post town PILTON | | | | | | |
| the case of a corporation or Scottish firm, give the | County/Region Some SET. | | | | | | | |
| registered or principal office address. | UK Postcode B A L L L X | | | | | | | |
| If a partnership, give the names and addresses of | Country | Country LENGLAND | | | | | | |
| the partners or the name of the partnership and office address | | | • | | | | | |

| Directors Please list the directors * Voluntary details | in alphabetical order | Details of new directors must be notified on form 288a | | | | | |
|---|--|---|--|--|--|--|--|
| In the case of a director that is a | Name *Style/Title | 1 MR | | | | | |
| corporation or a Scottish firm, the | | Day Month Year | | | | | |
| name is the corporate or firm name | | 0910711964 | | | | | |
| | Forename(s) | TERENCE DONALD. | | | | | |
| †† 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. | Surname | WILLIAMS. | | | | | |
| | Address †† | BARN OWLS | | | | | |
| | , [] | EAST TOWN LANE, | | | | | |
| | | IPILTON, | | | | | |
| | n County/Region | on SomtRSET | | | | | |
| | sh | | | | | | |
| | Country | ENGLAND. | | | | | |
| | Nationality | BRITISH. | | | | | |
| | | BUILDERS | | | | | |
| <u> </u> | Duamess cooupans. | | | | | | |
| Directors | | | | | | | |
| * Voluntary details | s in alphabetical order | Details of new directors must be notified on form 288a | | | | | |
| * Voluntary details In the case of a | | | | | | | |
| * Voluntary details In the case of a director that is a corporation or a | | Details of new directors must be notified on form 288a Day Month Year | | | | | |
| * Voluntary details In the case of a director that is a | Name *Style/Title Date of birt | Day Month Year 10 6 10 5 11 9 5 5. | | | | | |
| * Voluntary details In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm | Name *Style/Title Date of birt | Day Month Year | | | | | |
| * 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 Date of birt Forename(s | Day Month Year 10 6 10 5 11 9 5 5. | | | | | |
| * Voluntary details In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name †† Tick the box if the address shown is a service address for the | Name *Style/Title Date of birt Forename(s | Day Month Year | | | | | |
| * Voluntary details In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name †† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Orde | Name *Style/Title Date of birt Forename(s Surnam the Address † | Day Month Year 10610511955 TANE HAREN. BARN OWLS, | | | | | |
| * Voluntary details In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name †† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Orde granted under section 723B of the Compan Act 1985. Otherwise | Name *Style/Title Date of birt Forename(s Surnam the Address † | Day Month Year 10610511955 TANE HAREN. WILLIAMS | | | | | |
| * Voluntary details In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name †† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Orde granted under sectic 723B of the Compan Act 1985. Otherwise give your usual residential address. | Name *Style/Title Date of birt Forename(s Surnam the Address † | Day Month Year 10 610 511 9 5 5. TANE FAREN. BARN OWLS, EAST TOWN LANE | | | | | |
| * Voluntary details In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name †† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Orde granted under section 723B of the Compan Act 1985. Otherwise give your usual | Name *Style/Title Date of birth Forename(s Surnam Address † In County/Regio | Day Month Year 10 610 511 9 5 5. TANE FAREN. BARN OWLS, EAST TOWN LANE | | | | | |
| * Voluntary details In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name †† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Orde granted under section 723B of the Compan Act 1985. Otherwise give your usual residential address. the case of a corporation or Scott firm, give the registe | Name *Style/Title Date of birth Forename(s Surnam Address † Forename(s County/Region Surnam Address † County/Region County/Region County/Region County/Region County/Region | Day Month Year ID 16 10 15 11 9 5 5. I JANE KAREN. I BARN OWLS, EAST TOWN LANE I PILTON, I SOMERSET. IEB LALL IL IN IX. | | | | | |
| * Voluntary details In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name †† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Orde granted under section 723B of the Compan Act 1985. Otherwise give your usual residential address. the case of a corporation or Scott firm, give the registe or principal office | Name *Style/Title Date of birth Forename(s Surnam Address † Forename(s County/Region Surnam Address † County/Region County/Region County/Region County/Region County/Region | Day Month Year ID 16 10 15 11 9 5 5. I JANE KAREN. I BARN OWLS, EAST TOWN LANE I PILTON, I SOMERSET. IEB LALL IL IN IX. | | | | | |
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| Issue share capital Enter details of all the shares in issue at the date of this return | Class (e.g. Ordinary/Preference) | Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock) | | | | |
|--|---|--|---------------------------|--|--|--|
| | ORDINARY | 100 | <u> </u> | | | |
| | | | | | | |
| | Totals | 100 | L = 100 | | | |
| Fraded 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 opublic company at any time this return | company was a traded e during the period of | | | | |
| List of past and present shareholders (use attached schedule where appropriate) | Please tick the appropriate | box below: | On paper In anothe 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 fo company is enclosed. Plea | r a private or non-traded p se complete Schedule A | ublic | | | |
| 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 | 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. | | | | | |
| returns. | A list containing shareholder changes is enclosed → For private or non-traded public companies, please | | | | | |
| | | e A mpanies, please complet | e | | | |
| | Schedule B | - the second second | | | | |
| | There were no shareholde | | a to the hest of my | | | |
| Certificate Signed | knowledge and belief | | Date 20.01.00 | | | |
| * Please delete as appropriate | *(director / secretary) | | [X0.01.0 | | | |
| When you have signed the return, send it with the fee to the Registrar of Companies. Make cheques payable to Companies House. | This return includes | continuation sheet (enter number) | s | | | |
| You do not have to give any contact information in the box opposite but if you do, it will help Companies House to | 1 | | | | | |
| contact you if there is a query on the form. The contact information that you | | | | | | |

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