

363a

Please complete in typescript, or in bold black capitals

Annual Return

408974/30

CHFP010

Company Number

5853239

Company Name in full

ABBOTTS MEWS (LITTLE LEVER) MANAGEMENT COMPANY LIMITED

_	_			
Date	٥f	this	reti	ırn

The information in this return is made up to

 Day
 Month
 Year

 2
 1
 0
 6
 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

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

LONGFIELD

KENT

DA3 8HQ

Principal business activities

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

9800

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

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

THE MANOR HOUSE, NORTH ASH ROAD, NEW ASH GREEN

Companies House, Crown Way, Cardiff, CF14 3UZ for companies registered in England and Wales

DX 33050 Cardiff

or

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



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 Debentu If there is a register of debentuor a duplicate of any such of it, which is not kept at the office, state where it is kepted.	penture holders, register or part ne registered of Post town			
County / Region		UK Postcode		
Company type				
Public limited company				
Private company limited b	y 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		
(Please photocopy this area to provide details of joint	* Style / Title	L		
secretanes) * Voluntary details	Forename(s)	JENNIFER ELLEN		
If a partnership give the names and addresses of the partners or the name of the partnership and office address	Surname	CLARK		
	5	TRES VILLAE, COURT NO 7, OFF CHESTER ROAD		
Usual residential address must be	Post town	MACCLESFIELD		
given In the case of a corporation, give the registered or principal office address	County / Region	CHESHIRE UK Postcode SK11 8DL		
	Country	United Kingdom		
		•		

BLUEPRINT

Directors Please list directors in alphabetical order		Details of new directors must be notified on form 288a		
Na	* Style / Title			
Directors In the case of a director that is a corporate or a Scottish firm, the name is the	Date of birth	Day Month Year 2 4 0 6 1 9 5 6		
	Forename(s)	JENNIFER ELLEN		
corporate or firm name	Surname	CLARK		
Address		TRES VILLAE, COURT NO 7,	OFF CHESTER ROAD	
Usual residential address must be				
given In the case of a corporation,	Post town	MACCLESFIELD		
give the registered or principal office	County / Region	CHESHIRE	UK Postcode SK11 8DL	
address	Country	United Kingdom	Nationality British	
	Business occupation	Company Director		
* Voluntary details				
Na	* Style / Title			
Directors In the case of a director that is a corporate or a Scottish firm, the name is the corporate or firm name		Day Month Year 2 3 0 2 1 9 6 7		
	Forename(s)	David		
	Surname	Shard		
Address		111 Bucklow Gardens		
Usual residential address must be given in the case of a corporation, give the registered or principal office address				
	Post town			
	County / Region	Cheshire	UK Postcode WA13 9RN	
	Country	L	Nationality British	
Business occupation		Company Director		

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)
		L	
		L	
		L	<u> </u>
1		1	1
	Totals		
List of past and present shareh	oldere		
(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	<u> </u>	
returns	A list of changes is en	on pape	er in another format
	A list of changes is cal	Closed	
	A full list of sharehold	ers is enclosed	
Certificate	I certify that the inform knowledge and belief	nation given in this return i	s true to the best of my
	(ast		22/1/00
Sign	ed DANS	Date	e [25/20]00
† Please delete as appropriate	† a director / secretary		
M/hon you have exped the return and			
When you have signed the return send i with the fee to the Registrar of	t This return in	cludes 0	continuation sheets
Companies Cheques should be made payable to Companies House.		(enter number)	
Please give the name, address, telephor	ne Dx: 41950	Non Asy GREE	v 2.
number and, if available, a DX number and Exchange of the person Companies	·		
House should contact if there is any que		Tel 1 1474 8763	43
BLUEPRINT	DY number 1.455		^ -
2000	DX number 4195	OON excitatinge	low Asy bream?