



**Companies House**  
— for the record —

**AR01** (ef)

**Annual Return**



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*Company Name:* **CROWN NURSING & RESIDENTIAL HOMES LTD**

*Company Number:* **05951495**

*Date of this return:* **29/09/2011**

*SIC codes:* **8514**

*Company Type:* **Private company limited by shares**

*Situation of Registered Office:* **HOLWAY HOUSE  
130 STATION ROAD  
ILMINSTER  
SOMERSET  
TA19 9PW**

**Officers of the company**

## *Company Secretary 1*

*Type:* **Person**  
*Full forename(s):* **CHARLES MUNYARDADZI**

*Surname:* **CHIHOTA**

*Former names:*

*Service Address:* **HOLWAY HOUSE  
130 STATION ROAD  
ILMINSTER  
SOMERSET  
TA19 9PW**

*Company Director*    ***I***

*Type:*                      **Person**

*Full forename(s):*        **JANE**

*Surname:*                **NGORIMA**

*Former names:*

*Service Address:*        **HOLWAY HOUSE  
130 STATION ROAD  
ILMINSTER  
SOMERSET  
TA19 9PW**

*Country/State Usually Resident:*    **GREAT BRITAIN**

*Date of Birth:*    **15/07/1970**

*Nationality:*    **BRITISH**

*Occupation:*    **NURSE**

## Statement of Capital (Share Capital)

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<b>Class of shares</b>	<b>ORDINARY</b>	<i>Number allotted</i>	<b>100</b>
		<i>Aggregate nominal value</i>	<b>100</b>
<i>Currency</i>	<b>GBP</b>	<i>Amount paid per share</i>	<b>0</b>
		<i>Amount unpaid per share</i>	<b>0</b>
<i>Prescribed particulars</i>			
<b>EACH SHARE IS ENTITLED TO ONE VOTE</b>			

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## Statement of Capital (Totals)

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<i>Currency</i>	<b>GBP</b>	<i>Total number of shares</i>	<b>100</b>
		<i>Total aggregate nominal value</i>	<b>100</b>

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## *Full Details of Shareholders*

The details below relate to individuals / corporate bodies that were shareholders as at 29/09/2011 or that had ceased to be shareholders since the made up date of the previous Annual Return

*A full list of shareholders for a private or non-traded public company are shown below*

*Shareholding 1* : 0 ORDINARY shares held as at the date of this return  
*Name:* CHARLES CHIHOTA

*Shareholding 2* : 100 ORDINARY shares held as at the date of this return  
*Name:* JANE NQORIMA

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## *Authorisation*

*Authenticated*

*This form was authorised by one of the following:*

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