



Companies House

AR01 (ef)

Annual Return



Received for filing in Electronic Format on the: **25/11/2015**

X4KY5FOW

Company Name: **ALSO (UK)**

Company Number: **05982732**

Date of this return: **07/10/2015**

SIC codes: **85590**

Company Type: **Private company limited by guarantee exempt under section 60**

Situation of Registered Office: **UNIT 16 QUAY LEVEL
ST PETERS WHARF
NEWCASTLE UPON TYNE
TYNE & WEAR
NE6 1TZ**

Officers of the company

Company Secretary 1

Type: **Person**

Full forename(s): **MIRIAM**

Surname: **ABDULLAH**

Former names:

Service Address: **73 HIGHFIELD ROAD
SOUTH SHIELDS
TYNE & WEAR
NE34 6HG**

Company Director 1

Type: **Person**

Full forename(s): **DR JOAN EVELYN**

Surname: **AARVOLD**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: ****/08/1949**

Nationality: **BRITISH**

Occupation: **LECTURE**

Company Director 2

Type: **Person**
Full forename(s): **ROGER WOLFE**

Surname: **NEUBERG**

Former names:

Service Address: **9 BARRINGTON ROAD
STONEYGATE
LEICESTERSHIRE
LE2 2RA**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: ****/05/1941** *Nationality:* **BRITISH**

Occupation: **CONSULTANT OBSTETRICIAN &
GYNA**

Company Director 3

Type: **Person**

Full forename(s): **PROF PAUL**

Surname: **LEWIS**

Former names:

Service Address: **FLAT 24 AVON HOUSE WEST CLIFF ROAD
BOURNEMOUTH
ENGLAND
BH2 5EZ**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/04/1950**

Nationality: **BRITISH**

Occupation: **PROFESSOR**

Company Director 4

Type: **Person**

Full forename(s): **DR PHILLIP SAMUEL**

Surname: **HOGG**

Former names:

Service Address: **104 BLACKFRIARS ROAD
SALFORD
ENGLAND
M3 7ER**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/01/1975** *Nationality:* **BRITISH**

Occupation: **DOCTOR OBS & GYNE**

Company Director 5

Type: **Person**

Full forename(s): **DOCTOR STAMATIOS**

Surname: **KARAVOLOS**

Former names:

Service Address: **915 THE BAR ST. JAMES GATE
NEWCASTLE UPON TYNE
UNITED KINGDOM
NE1 4BB**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: ****/05/1976** *Nationality:* **GREEK**

Occupation: **DOCTOR OBS & GYNE**

Company Director **6**

Type: **Person**
Full forename(s): **MISS ALISON**

Surname: **COLLIER**

Former names:

Service Address: **8 CORNER FIELD
KINGSNORTH
ASHFORD
KENT
ENGLAND
TN23 3NH**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/01/1967** *Nationality:* **BRITISH**
Occupation: **MIDWIFE**

Company Director 7

Type: **Person**

Full forename(s): **MRS CATHERINE PERPETUA**

Surname: **MCD AID**

Former names:

Service Address: **16 OSPREY DRIVE
LONDONDERRY
NORTHERN IRELAND
BT47 2LE**

Country/State Usually Resident: **NORTHERN IRELAND**

Date of Birth: ****/08/1955** *Nationality:* **NORTHERN IRISH**

Occupation: **ASSISTANT DIRECTOR WOMENS
& CHILDREN HEALTHCARE**

Authorisation

Authenticated

This form was authorised by one of the following:

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