



Companies House
— for the record —

AR01 (ef)

Annual Return



Received for filing in Electronic Format on the: **15/10/2013**

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Company Name: **Action Deafness Limited**

Company Number: **06706042**

Date of this return: **24/09/2013**

SIC codes: **74300**

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

Situation of Registered Office: **THE PEEPUL CENTRE 28 ORCHARDSON AVENUE
LEICESTER
LEICESTERSHIRE
ENGLAND
LE4 6DP**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **MR CRAIG ANDREW**

Surname: **CROWLEY MBE**

Former names:

Service Address: **13 NORTH STREET WEST
UPPINGHAM
OAKHAM
LEICESTERSHIRE
ENGLAND
LE15 9SF**

Company Director ***1***

Type: **Person**

Full forename(s): **MRS MARY ROSE**

Surname: **BROOKS**

Former names:

Service Address: **KEEPERS COTTAGE
LODDINGTON
LEICESTERSHIRE
ENGLAND
LE7 9XE**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **16/03/1951** *Nationality:* **BRITISH**

Occupation: **DIRECTOR**

Company Director **2**

Type: **Person**

Full forename(s): **MR COLIN**

Surname: **HENSON**

Former names:

Service Address: **2 BURNS CLOSE
MELTON MOWBRAY
LEICESTERSHIRE
ENGLAND
LE13 1LR**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **02/10/1938** *Nationality:* **BRITISH**

Occupation: **MANAGING DIRECTOR**

Company Director **3**

Type: **Person**

Full forename(s): **MR ROLAND FREDERICK**

Surname: **HILTON**

Former names:

Service Address: **18 THE HOMESTEAD
MOUNTSORREL
LOUGHBOROUGH
LEICESTERSHIRE
ENGLAND
LE12 7HS**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **17/06/1945** *Nationality:* **BRITISH**

Occupation: **DIRECTOR/RETIRED
CONSULTANT**

Company Director 4

Type: **Person**
Full forename(s): **MR PETER JAMES**

Surname: **KENDALL**

Former names:

Service Address: **68 INGLEWOOD AVENUE
MICKLEOVER
DERBY
DERBYSHIRE
ENGLAND
DE3 0RU**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **22/04/1967** *Nationality:* **BRITISH**
Occupation: **DIRECTOR**

Company Director **5**

Type: **Person**

Full forename(s): **MR CHRISTOPHER MARK**

Surname: **RATCLIFFE**

Former names:

Service Address: **21 COTES ROAD
BARROW UPON SOAR
LEICESTERSHIRE
ENGLAND
LE12 8JP**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **24/05/1967** *Nationality:* **BRITISH**

Occupation: **DIRECTOR**

Company Director 6

Type: **Person**
Full forename(s): **MR BENJAMIN JOHN ALEXANDER**

Surname: **STEPHENS**

Former names:

Service Address: **1 LETHBRIDGE CLOSE
OAKHAM
RUTLAND
LEICESTERSHIRE
ENGLAND
LE15 6UJ**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **14/03/1977** *Nationality:* **BRITISH**
Occupation: **DIRECTOR**

Authorisation

Authenticated

This form was authorised by one of the following:

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