Companies House

AR01 (ef)

Annual Return

Received for filing in Electronic Format on the: **12/10/2015**

X4HWEWFD

Company Name:	**L.E.A.D ACADEMY TRUST**
Company Number:	**07767010**
Date of this return:	**08/09/2015**
SIC codes:	**85200**
Company Type:	**Private company limited by guarantee exempt under section 60**
Situation of Registered Office:	**5A THE ROPEWALK** **NOTTINGHAM** **ENGLAND** **NG1 5DU**

Officers of the company

Company Director 1

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

Surname: **BERRY**

Former names:

Service Address recorded as Company's registered office

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

Date of Birth: ****/03/1953** *Nationality:* **BRITISH**
Occupation: **CONSULTANT**

Company Director 2

Type: **Person**
Full forename(s): **MR MARK JONATHAN**

Surname: **BLOIS**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/05/1970** *Nationality:* **BRITISH**
Occupation: **LAWYER**

Company Director 3

Type: **Person**

Full forename(s): **MR HOWARD WILLIAM**

Surname: **DOWELL**

Former names:

Service Address: **THE OLD PUMPHOUSE L.E.A.D. ACADEMY TRUST**
5 THE ROPEWALK
NOTTINGHAM
ENGLAND
NG1 5DU

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/07/1951** *Nationality:* **BRITISH**

Occupation: **CHARTERED SURVEYOR**

Company Director 4

Type: **Person**
Full forename(s): **MRS DERYN**

Surname: **HARVEY**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/11/1949** *Nationality:* **BRITISH**
Occupation: **EDUCATION CONSULTANT**

Company Director 5

Type: **Person**
Full forename(s): **MS DIANA**

Surname: **OWEN**

Former names:

Service Address recorded as Company's registered office

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

Date of Birth: ****/05/1964** *Nationality:* **BRITISH**
Occupation: **CHIEF EXECUTIVE**

Company Director 6

Type: **Person**

Full forename(s): **PROFESSOR MICHAEL JOHN**

Surname: **WATERS**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/04/1949** *Nationality:* **ENGLISH**

Occupation: **CHIEF EDUCATION OFFICER**

Authorisation

Authenticated

This form was authorised by one of the following:

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