



Companies House

AR01 (ef)

Annual Return



Received for filing in Electronic Format on the: **22/10/2015**

X4IJYTN5

Company Name: **SOCIETY FOR DIALECTICAL BEHAVIOUR THERAPY**

Company Number: **08239102**

Date of this return: **03/10/2015**

SIC codes: **94120**

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

Situation of Registered Office: **SECOND FLOOR 2 WALSWORTH ROAD
HITCHIN
HERTFORDSHIRE
SG4 9SP**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **MRS ELIZABETH MARY**

Surname: **SAMUELS**

Former names:

Service Address recorded as Company's registered office

Company Director 1

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

Surname: **DUNKLEY**

Former names: **HULME**

Service Address: **C/O D & E ACCOUNTANCY LTD SECOND FLOOR
2 WALSWORTH ROAD
HITCHIN
HERTFORDSHIRE
UNITED KINGDOM
SG4 9SP**

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

Date of Birth: ****/03/1960** *Nationality:* **BRITISH**
Occupation: **PSYCHOLOGICAL THERAPIST**

Company Director 2

Type: **Person**
Full forename(s): DR EMILY KATHERINE

Surname: FOX

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: ENGLAND

Date of Birth: **/03/1969 *Nationality:* BRITISH

Occupation: CLINICAL PSYCHOLOGIST

Company Director 3

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

Surname: HENDERSON

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: ENGLAND

Date of Birth: **/02/1971 *Nationality:* BRITISH

Occupation: CONSULTANT FORENSIC
CLINICAL PSYCHOLOGIST

Company Director 4

Type: **Person**
Full forename(s): **PROF STEPHEN JOHN**

Surname: **PALMER**

Former names:

Service Address: **C/O D & E ACCOUNTANCY LTD SECOND FLOOR
2 WALSWORTH ROAD
HITCHIN
HERTFORDSHIRE
UNITED KINGDOM
SG4 9SP**

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

Date of Birth: ****/02/1955** *Nationality:* **BRITISH**
Occupation: **PSYCHOLOGIST**

Company Director 5

Type: **Person**

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

Surname: **STANTON**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/10/1957**

Nationality: **BRITISH**

Occupation: **CLINICAL PSYCHOLOGIST**

Authorisation

Authenticated

This form was authorised by one of the following:

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