



Companies House

**AR01** (ef)

**Annual Return**



Received for filing in Electronic Format on the: **26/04/2016**

**X55P7R7F**

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*Company Name:* **ASSOCIATION OF PHARMACY TECHNICIANS (UK)**

*Company Number:* **08506500**

*Date of this return:* **26/04/2016**

*SIC codes:* **74909**

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

*Situation of Registered Office:* **0NE VICTORIA SQUARE  
BIRMINGHAM  
WEST MIDLANDS  
B1 1BD**

## Single Alternative Inspection Location (SAIL)

*The address for an alternative location to the company's registered office for the inspection of registers is:*

2 SCHOOL LANE  
THURSTASTON  
WIRRAL  
MERSEYSIDE  
CH61 0HH

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*The following records have moved to the single alternative inspection location:*

Register of members (section 114)  
Register of directors (section 162)  
Directors' service contracts (section 228)  
Records of resolutions and meetings (section 358)

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### Officers of the company

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*Company Director*    **1**

*Type:*                      **Person**  
*Full forename(s):*        **MR KIERAN**

*Surname:*                **CASEY-MCEVOY**

*Former names:*

*Service Address recorded as Company's registered office*

*Country/State Usually Resident:*    **ENGLAND**

*Date of Birth:*    **\*\*/04/1987**                      *Nationality:*    **BRITISH**

*Occupation:*        **PHARMACY TECHNICIAN**

## *Company Director* 2

*Type:* **Person**

*Full forename(s):* **TERESA JUNE**

*Surname:* **FENN**

*Former names:* **WHITEHEAD**

*Service Address recorded as Company's registered office*

*Country/State Usually Resident:* **ENGLAND**

*Date of Birth:* **\*\*/06/1954**

*Nationality:* **BRITISH**

*Occupation:* **PHARMACY TECHNICIAN**

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## *Company Director* 3

*Type:* **Person**

*Full forename(s):* **RACHAEL BRIONY**

*Surname:* **LEMON**

*Former names:*

*Service Address recorded as Company's registered office*

*Country/State Usually Resident:* **ENGLAND**

*Date of Birth:* **\*\*/11/1971**

*Nationality:* **BRITISH**

*Occupation:* **PHARMACY TECHNICIAN**

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*Company Director* 4

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

Surname: **MATHIESON**

Former names:

*Service Address recorded as Company's registered office*

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

Date of Birth: **\*\*/06/1953** Nationality: **BRITISH**

Occupation: **PHARMACY TECHNICIAN**

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*Company Director* 5

Type: **Person**  
Full forename(s): **MRS DIANE CLARE**

Surname: **MEECH**

Former names:

*Service Address recorded as Company's registered office*

Country/State Usually Resident: **ENGLAND**

Date of Birth: **\*\*/03/1966** Nationality: **BRITISH**

Occupation: **PHARMACY TECHNICIAN**

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## *Company Director* 6

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

Surname: **PUAAR**

Former names:

*Service Address recorded as Company's registered office*

Country/State Usually Resident: **ENGLAND**

Date of Birth: **\*\*/12/1971** Nationality: **BRITISH**

Occupation: **PHARMACY TECHNICIAN**

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## *Company Director* 7

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

Surname: **TAYLOR**

Former names:

*Service Address recorded as Company's registered office*

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

Date of Birth: **\*\*/09/1970** Nationality: **BRITISH**

Occupation: **PHARMACY TECHNICIAN**

## *Authorisation*

*Authenticated*

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

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