



Companies House

**AR01** (ef)

**Annual Return**



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*Company Name:* **ARCADIA PHARMACEUTICALS LIMITED**

*Company Number:* **08708305**

*Date of this return:* **27/09/2015**

*SIC codes:* **74909**

*Company Type:* **Private company limited by shares**

*Situation of Registered Office:* **UNIT 3 BELL COURT  
SWANSEA WEST BUSINESS PARK FFORESTFACH  
SWANSEA  
SA5 4HP**

**Officers of the company**

## *Company Secretary 1*

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

*Surname:* **COLEBROOK**

*Former names:*

*Service Address recorded as Company's registered office*

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## *Company Director 1*

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

*Surname:* **OVERY**

*Former names:*

*Service Address:* **UNIT 3 BELL COURT  
SWANSEA WEST BUSINESS PARK FFORESTFACH  
SWANSEA  
WALES  
SA5 4HP**

*Country/State Usually Resident:* **WALES**

*Date of Birth:* **\*\*/08/1946** *Nationality:* **BRITISH**  
*Occupation:* **DIRECTOR**

## Statement of Capital (Share Capital)

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<b>Class of shares</b>	<b>ORDINARY</b>	<i>Number allotted</i>	<b>100</b>
		<i>Aggregate nominal value</i>	<b>100</b>
<i>Currency</i>	<b>GBP</b>	<i>Amount paid per share</i>	<b>1</b>
		<i>Amount unpaid per share</i>	<b>0</b>

### *Prescribed particulars*

**ALL RIGHTS ATTACHED, EACH SHARE IS ENTITLED TO ONE VOTE IN ANY CIRCUMSTANCES, IS ENTITLED PARI PASSU TO DIVIDEND PAYMENTS OR ANY OTHER DISTRIBUTION AND IS ENTITLED PARI PASSU TO PARTICIPATE IN A DISTRIBUTION ARISING FROM A WINDING UP OF THE COMPANY**

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## Statement of Capital (Totals)

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<i>Currency</i>	<b>GBP</b>	<i>Total number of shares</i>	<b>100</b>
		<i>Total aggregate nominal value</i>	<b>100</b>

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## *Full Details of Shareholders*

The details below relate to individuals / corporate bodies that were shareholders as at 27/09/2015 or that had ceased to be shareholders since the made up date of the previous Annual Return

*A full list of shareholders for the company are shown below*

*Shareholding 1* : **100 ORDINARY shares held as at the date of this return**  
*Name:* **ARCADIA PHARMA LIMITED**

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## *Authorisation*

*Authenticated*

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

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