



Annual Return

Company Name: **HARBOROUGH TOWN COMMUNITY TRUST**

Company Number: **09608602**



Received for filing in Electronic Format on the: **08/07/2016**

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Company Name: **HARBOROUGH TOWN COMMUNITY TRUST**

Company Number: **09608602**

Date of this return: **26/05/2016**

Sic Codes: **93120**

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

Situation of **BOWDEN HOUSE 36 NORTHAMPTON ROAD MARKET**

Registered Office: **HARBOROUGH LEICESTERSHIRE**

**UNITED KINGDOM LE16 9HE**

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## Officers of the company

### Company Secretary 1

Type: **Person**  
Full Forename(s): **MR COLIN**  
Surname: **MURRANT**  
Service Address: **24 MEISSEN AVENUE DESBOROUGH**  
**UNITED KINGDOM NN14 2YA**

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### Company Director 1

Type: **Person**  
Full Forename(s): **MRS SIOBHAN JUSTINE**  
Surname: **BREWIN**  
Service Address: **10 TOWER COURT LUBENHAM MARKET HARBOROUGH**  
**UNITED KINGDOM LE16 9SY**

Country/State: **UNITED KINGDOM**  
Usually Resident:  
Date of Birth: **\*\*/02/1970** Nationality: **BRITISH**  
Occupation: **BANK**  
**MANAGER**

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### Company Director 2

Type: **Person**  
Full Forename(s): **MR LAURENCE CHRISTOPHER**  
Surname: **JONES**  
Service Address: **BOWDEN HOUSE 36 NORTHAMPTON ROAD MARKET**  
**HARBOROUGH**  
**UNITED KINGDOM LE16 9HE**

Country/State: **UNITED KINGDOM**  
Usually Resident:  
Date of Birth: **\*\*/03/1959** Nationality: **BRITISH**  
Occupation: **SENIOR**  
**EXECUTIVE**

## Company Director 3

Type: **Person**  
Full Forename(s): **MR IVOR LLEWELLYN**  
Surname: **MCTIGHE**  
Service Address: **8 FIELDHEAD CLOSE MARKET HARBOROUGH  
UNITED KINGDOM LE16 9DZ**

Country/State **UNITED KINGDOM**

Usually Resident:

Date of Birth: **\*\*/12/1967**

Nationality: **BRITISH**

Occupation: **BANK  
MANAGER**

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## Company Director 4

Type: **Person**  
Full Forename(s): **MR COLIN**  
Surname: **MURRANT**  
Service Address: **24 MEISSEN AVENUE DESBOROUGH  
UNITED KINGDOM NN14 2YA**

Country/State **UNITED KINGDOM**

Usually Resident:

Date of Birth: **\*\*/02/1950**

Nationality: **BRITISH**

Occupation: **RETIRED**

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## Company Director 5

Type: **Person**  
Full Forename(s): **MR JOSEPH WILLIAM**  
Surname: **OWEN**  
Service Address: **31 STANLEY WAY FAIRACRES LUTTERWORTH COVENTRY ROAD  
UNITED KINGDOM LE17 4FB**

Country/State **UNITED KINGDOM**

Usually Resident:

Date of Birth: **\*\*/03/1975**

Nationality: **BRITISH**

Occupation: **CATERER**

## Company Director 6

Type: **Person**  
Full Forename(s): **MR GORDON WALLACE**  
Surname: **ROBINSON**  
Service Address: **8 THE OVAL MARKET HARBOROUGH  
UNITED KINGDOM LE16 7LB**

Country/State **UNITED KINGDOM**

Usually Resident:

Date of Birth: **\*\*/09/1951**

Nationality: **BRITISH**

Occupation: **BUILDER**

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## Company Director 7

Type: **Person**  
Full Forename(s): **MR ANDREW KEITH**  
Surname: **WINSTON**  
Service Address: **BOWDEN HOUSE 36 NORTHAMPTON ROAD MARKET  
HARBOROUGH  
UNITED KINGDOM LE16 9HE**

Country/State **UNITED KINGDOM**

Usually Resident:

Date of Birth: **\*\*/11/1955**

Nationality: **BRITISH**

Occupation: **ENGINEER**

# Authorisation

Authenticated

This form was authorised by one of the following:

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

