

Please complete in typescript, or in bold black capitals.

CHFP010

Company Number |

Company Name in full |

## **Annual Return**

SC162	2639			 		
Alba	Health	Limited		 	 	
			_		 	

#### Date of this return

The information in this return is made up

Day	Month	Ye	ar	
2 7	0 [1	2 0		:

#### Date of next return

If you wish to make your next return to a date earlier than the anniversary of this return please show the date here. Companies House will then send a form at the appropriate time.

Day	Month	Year		
L_				

EH4 2LW

Registrar of Companies at:

### Registered Office

Show here the address at the date of this return.

Any change of registered office must be notified on form 287.

Post town

County / Region

UK Postcode

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Miller House, 18 South Groathill Avenue

## Principal business activities

Show trade classification code number(s) for the principal activity or activities.

4521	
	L

If the code number cannot be determined, give a brief description of principal activity.

When you have completed and signed the form please send it to the



Companies House, Crown Way, Cardiff, CF14 3UZ

for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh

DX 33050 Cardiff

Register of members If the register of members the registered office, state kept.	is not kept at	
Register of Debentu If there is a register of det or a duplicate of any such of it, which is not kept at t office, state where it is ke	penture holders, register or part he registered pt. Post town	
	County / Region	UK Postcode
Company type		
Public limited company		
Private company limited b	y shares	x
Private company limited by without share capital Private company limited by exempt under section 30 Private company limited by exempt under section 30 Private unlimited company capital Private unlimited company capital	y shares y guarantee / with share	Please tick the appropriate box
Company Secretary		Details of a new company secretary must be notified on form 288a.
(Please photocopy this area to provide details of joint secretaries).	* Style / Title	Mrs
* Voluntary details.	Forename(s)	Pamela June
If a partnership give the names and addresses of the partners or the name Address	Surname s	Smyth Hillside House
of the partnership and office address.		
Usual residential address must be	Post town	Ecclesmachan
given. In the case of a corporation, give the registered	County / Region	West Lothian UK Postcode EH52 6NG
or principal office address.	Country	Scotland



Please list directors in alphabetical order.		Details of new directors must be notified on form 288a
N	lame * Style / Title	Mr
<b>Directors</b> In the case of a director that is a corporate		Day         Month         Year           1         9         0         3         1         9         4         9
or a Scottish firm, the name is the	Forename(s)	Keith Manson
corporate or firm name.	Surname	Miller
A	Address	Cherry Hollows, 1(b) Easter Belmont Road
Usual residential address must be given. In the case	Post town	EDINBURGH
of a corporation, give the registered or principal office	County / Region	UK Postcode EH12 6EX
address.	Country	Nationality British
	Business occupation	Company Director
* Voluntary details.		
N	lame * Style / Title	<u> </u>
Directors In the case of a director that is a corporate or a Scottish firm, the name is the corporate or firm name.	Date of birth Forename(s) Surname	Day Month Year
A	ddress	<u> </u>
Usual residential address must be given. In the case of a corporation, give the registered	Post town	L
or principal office address.	County / Region Country	
	Pusiness securation	1



Issued share capital Enter details of all the shares in issue at the date of this return.	Class (e.g. Ordinary/Preference)	Number of shares issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)
Ordinary			2 £2.00
	Totals		2 2.00
List of past and present sharehod (use attached schedule where appropriate) A full list is required if one was not included with either of the last two returns.	There were no change  A list of changes is end  A full list of shareholder	on pa	aper in another format
Certificate	I certify that the inform	ation given in this retur	n is true to the best of my
Signe † Please delete as appropriate.	knowledge and belief.		ate 30/01/2004
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House.	This return inc	cludes 1 (enter number)	continuation sheets.
Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query	House, 18 South		up Limited, Miller Edinburgh, EH4 2LW

\_\_\_\_DX exchange [

DX number |



# hareholders to form 363a

Company Secretary		List of past and present s Schedule t
CHFP010	Company Number	SC162639

Company Name in full | Alba Health Limited

> Changes to shareholders particulars or details of the amount of stock or shares transferred must be completed each year

- You must provide a "full list" of all the company shareholders on:
  - The company's first annual return following the incorporation;
  - Every third annual return after a full list has been provided
- List the company shareholders in alphabetical order or provide an index
- List joint shareholders consecutively

	-	Shares or amount of stock transferred (if appropriate)		
Shareholders' details	Class and number of shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer	
Name The Miller Group Limited	£1.00 Ordinary			
Address Miller House, 18 South Groathill Avenue, EDINBURGH		:		
	Shares Held			
UK postcode EH4 2LW				
Name				
Address				
UK postcode				
Name				
Address	—			
1				
	_			
UK postcode				