



Please complete in typescript,
or in bold black capitals.

CHFP029

363a

Annual Return



Company Number SC185128

Company Name in full PHARMACY CARE LIMITED

Date of this return

The information in this return is made up to

Day Month Year

01 / 04 / 2003

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

01 / 04 / 2004

Registered Office

Show here the address at the date of
this return.

204 POLMADIE ROAD

HAMPDEN PARK INDUSTRIAL ESTATE

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

Post town GLASGOW

County / Region

UK Postcode

G5 0 HD

Principal business activities

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

5231

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



SCT SEGNTKRD 0932
COMPANIES HOUSE 08/05/03

SCT SDXRYKHS 0451
COMPANIES HOUSE 28/04/03

When you have completed and signed the form please send it to the
Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff
for companies registered in England and Wales

or

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

DX 235 Edinburgh

Register of members

If the register of members is not kept at the registered office, state here where it is kept.

Post town

County / Region

UK Postcode

Register of Debenture holders

If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state here where it is kept.

Post town

County / Region

UK Postcode

Company type

Public limited company

Private company limited by shares

Private company limited by guarantee without share capital

Private company limited by shares exempt under section 30

Private company limited by guarantee exempt under section 30

Private unlimited company with share capital

Private unlimited company without share capital

<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Please tick the appropriate box

Company Secretary

(Please photocopy this area to provide details of joint secretaries).

* Voluntary details.

If a partnership give the names and addresses of the partners or the name of the partnership and office address.

Usual residential address must be given. In the case of a corporation, or a Scottish firm, give the registered or principal office address.

Name

* Style / Title

MISS

Forename(s)

JANET RUTH

Surname(s)

HEATON

Address

7 HUNTERS ROW

PORTLAND STREET

Post town

COSBY

County / Region

LEICESTERSHIRE

UK Postcode

L E 9 1 T Q

Country

ENGLAND

Details of a new company secretary must be notified on form 288a.

Directors

Details of new directors must be notified on form 288a

Please list directors in alphabetical order.

Name	* Style / Title	MR	
	Day	Month	Year
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	1 7 / 1 1 / 1 9 5 2	
	Forename(s)	JOHN	
	Surname	HOOD ✓	
Address	BRIARWOOD, 15 TWATLING ROAD		
	BARNT GREEN		
	Post town	BIRMINGHAM	
Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.	County / Region	WEST MIDLANDS	UK Postcode B 4 5 8 H X
	Country	ENGLAND	Nationality BRITISH
	Business occupation	FINANCE DIRECTOR	

* Voluntary details.

Name	* Style / Title	MR	
	Day	Month	Year
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	2 8 / 0 1 / 1 9 5 8	
	Forename(s)	ANDREW MARK ✓	
	Surname	MURDOCK	
Address	THE BARN, CALDECOTT ROAD		
Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.	Post town	GREAT EASTON	
	County / Region	LEICESTERSHIRE	UK Postcode L E 1 6 8 T B
	Country	ENGLAND	Nationality BRITISH
	Business occupation	PHARMACIST	

Directors

Details of new directors must be notified on form 288a

Please list directors in alphabetical order.

Name	* Style / Title	MR	
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	Day 2 0 / Month 1 0 / Year 1 9 5 0	
	Forename(s)	PETER	
	Surname	SMERDON	
Address	40 STONETON CRESCENT, BALSALL COMMON		
Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.	Post town	COVENTRY	
	County / Region	WARWICKSHIRE	
	UK Postcode	C V 7 7 Q G	
	Country	ENGLAND	
Business occupation	Nationality	BRITISH	
		COMPANY SECRETARY	

* Voluntary details.

Name	* Style / Title		
Directors In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	Day / Month / Year	
	Forename(s)		
	Surname		
Address			
Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.	Post town		
	County / Region	UK Postcode	
	Country	Nationality	
	Business occupation		

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 £1	10,000	£ 10,000.00
Totals	10,000	£ 10,000.00

List of past and present shareholders

(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 changes in the period

☐

on paper in another format

A list of changes is enclosed

☐
☐

A full list of shareholders is enclosed

☒
☐
Certificate

I certify that the information given in this return is true to the best of my knowledge and belief.

Signed

[Signature]

Date

17 APR 2003

† Please delete as appropriate.

† a director/secretary

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 includes

(enter number)

continuation sheets.

Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should contact if there is any query.

MISS A WYLLIE, GEHE UK PLC, SAPPHIRE COURT, WALSGRAVE TRIANGLE, COVENTRY,

WARWICKSHIRE, CV2 2TX

Tel 024 7643 2513

DX number

DX exchange



List of past and present shareholders Schedule to form 363a

CHFP029

Company Number | SC185128

Company Name in full | PHARMACY CARE 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 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

Shareholders' details	Class and number of shares or amount of stock held	Shares or amount of stock transferred (if appropriate)	
		Class and number of shares or amount of stock transferred	Date of registration of transfer
Name AAH SUBSIDIARIES LIMITED Address SAPPHIRE COURT, WALSGRAVE TRIANGLE, COVENTRY, ENGLAND UK Postcode CV4 2L 2TX	ORDINARY £1 10,000		
Name Address UK Postcode L L L L L L L L			
Name Address UK Postcode L L L L L L L L			