



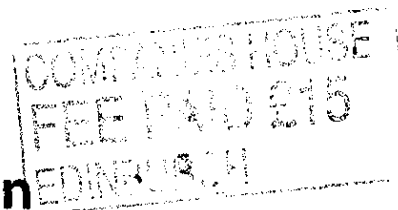
Companies House

— for the record —

Company Name

**PERTH AND KINROSS SOCIETY
FOR THE BLIND**

363s Annual Return



Company Type

**Private Company Limited By
Guarantee Exempt Under Sect 30**

Company Number

SC205004

Information extracted from
Companies House records on
27th February 2001

- > Please check the details printed in blue on this statement.
- > If any details are wrong, strike them through and write the correct details in the "Amended details" column.
- > Please use black pen and write in c



SCT SIVEAZG8 1317
COMPANIES HOUSE 02/04/01

Section 1: Company details

Ref: SC205004/13/37

	Current details	Amended details																
> Registered Office Address <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	8 Saint Leonards Bank Perth Perthshire PH2 8EB	Address _____ _____ _____ UK Postcode _ _ _ _ _																
> Register of Members <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Address where the Register is held At Registered Office	Address _____ _____ _____ UK Postcode _ _ _ _ _																
> Register of Debenture Holders <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Not Applicable	Address _____ _____ _____ UK Postcode _ _ _ _ _																
> Principal Business Activities <i>Please enter principal activity code(s) in "Amended details" column. See notes for guidance for list of activity codes. Please use the most appropriate code in the list, or write a short description of your company's activities.</i>	<i>None held, please enter SIC code or description in the amended details column.</i>	<table border="0"> <tr> <td>SIC CODE</td> <td>Description</td> </tr> <tr> <td><u>8514</u></td> <td><u>PROVISION OF WELFARE</u></td> </tr> <tr> <td></td> <td><u>+ CHARITABLE SERVICES</u></td> </tr> <tr> <td></td> <td><u>TO BLIND + PARTIALLY</u></td> </tr> <tr> <td></td> <td><u>SIGHTED PEOPLE.</u></td> </tr> <tr> <td><u> </u></td> <td>_____</td> </tr> <tr> <td><u> </u></td> <td>_____</td> </tr> <tr> <td><u> </u></td> <td>_____</td> </tr> </table>	SIC CODE	Description	<u>8514</u>	<u>PROVISION OF WELFARE</u>		<u>+ CHARITABLE SERVICES</u>		<u>TO BLIND + PARTIALLY</u>		<u>SIGHTED PEOPLE.</u>	<u> </u>	_____	<u> </u>	_____	<u> </u>	_____
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	<u>SIGHTED PEOPLE.</u>																	
<u> </u>	_____																	
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<u> </u>	_____																	

Section 2: Details of Officers of the Company

	Current details	Amended details
> Company Secretary If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. Particulars of a new Company Secretary must be notified on form 288.	Name Richard MAZUR Address Finlaggan House Logiealmond Perth Perthshire PH1 3TH	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of change _ _ / _ _ / _ _ _ _ Date Richard MAZUR ceased to be secretary (if applicable) _ _ / _ _ / _ _ _ _
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. Particulars of a new Director must be notified on form 288.	Name Heather Menzies CURRIE Address 9 Saint Leonards Bank Perth Perthshire PH2 8EB Date of birth 13/05/1935 Nationality British Occupation Retired	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _ _ _ _ _ Occupation _ _ _ _ _ Date of change _ _ / _ _ / _ _ _ _ Date Heather Menzies CURRIE ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. Particulars of a new Director must be notified on form 288.	Name Ronald CURRIE Address Flat 5, 9 Saint Leonards Bank Perth Perthshire PH2 8EB Date of birth 18/06/1934 Nationality British Occupation Retired	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _ _ _ _ _ Occupation _ _ _ _ _ Date of change _ _ / _ _ / _ _ _ _ Date Ronald CURRIE ceased to be director (if applicable) _ _ / _ _ / _ _ _ _

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> Director

If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.

Particulars of a new Director must be notified on form 288.

Current details

Name
Dr Charles James Edgar
WYNNE-WILLIAMS

Address
Crachan Cottage
Camserney
Aberfeldy
Perthshire
PH15 2JF

Date of birth 25/04/1940

Nationality British

Occupation Retired

Amended details

Name

Address

UK Postcode _ _ _ _ _

Date of birth _ _ / _ _ / _ _ _ _

Nationality _____

Occupation _____

Date of change _ _ / _ _ / _ _ _ _

Date Dr Charles James Edgar
WYNNE-WILLIAMS ceased to be
director (if applicable), _ _ / _ _ _ _



Companies House

— for the record —

363s Annual Return Declaration

- > When you have checked all the sections of this form, please complete this page and sign the declaration below.
- > If you want to change the made up date of this annual return, please complete 2 below.

1. Declaration

- ☐ I confirm that the details in this annual return are correct as at the made-up-date (shown at 2 below). I enclose the filing fee of £15.

Signature

R.A.Y. MAZUR

(Director / Secretary)

Date

30 / 03 / 2001

This date must not be earlier than the return date at 2 below

What to do now

Complete this page then send the whole of the Annual Return and the declaration to the address shown at 4 below.

2. Date of this return

- ☒ This AR is made up to
15/3/2001

If you are making this return up to an earlier date, please give the date here

__ / __ / ____

Note: The form must be delivered to CH within 28 days of this date

3. Date of next return

- ☐ If you wish to change your next return to a date earlier than **15th March 2002** please give the new date here:

__ / __ / ____

4. Where to send this form

- ☐ Please return this form to:
Registrar of Companies
Companies House
37 Castle Terrace
Edinburgh EH1 2EB

Have you enclosed the filing fee with the company number written on the reverse of the cheque?

Cheque



Postal Order



Cheque / Postal Order

Number

(Please complete as appropriate)

Contact Address

Please give the name and address of the person who should be contacted if there are any queries about this form.

Contact Name

RICHARD MAZURTelephone number *inc code*01738 626969

Address

PERTH + KINROSS SOCIETYFOR THE BLIND, 8 ST.LEONARDS BANK, PERTH.DX number *if applicable*

DX exchange

Postcode

P12 8EB