



*Companies House*  
— for the record —

**AR01** (ef)

**Annual Return**



XW6VKEOG

Received for filing in Electronic Format on the: **04/11/2009**

*Company Name:* **WEST LOTHIAN DRUG & ALCOHOL SERVICE**

*Company Number:* **SC212157**

*Date of this return:* **20/10/2009**

*SIC codes:* **7487**

*Company Type:* **Private company limited by guarantee exempt under section 60**

*Situation of Registered Office:* **43 ADELAIDE STREET  
LIVINGSTON  
WEST LOTHIAN  
EH54 5HQ**

**Officers of the company**

*Company Secretary* **I**

*Type:* **Person**

*Full forename(s):* **MARGOT**

*Surname:* **FERGUSON**

*Former names:*

*Service Address:* **21 SOUTH STREET  
ARMADALE  
BATHGATE  
WEST LOTHIAN  
EH48 3EW**

---

*Company Director* **I**

*Type:* **Person**

*Full forename(s):* **MS PATRICIA ANNE**

*Surname:* **ANIELLO**

*Former names:*

*Service Address:* **14 MANSFIELD COURT  
LIVINGSTON VILLAGE  
LIVINGSTON  
WEST LOTHIAN  
EH54 7BJ**

*Country/State Usually Resident:* **SCOTLAND**

*Date of Birth:* **17/01/1959** *Nationality:* **BRITISH**

*Occupation:* **FINANCE DIRECTOR**

*Company Director*      **2**

*Type:*                              **Person**  
*Full forename(s):*              **MS GILLIAN BARBARA**  
*Surname:*                        **COTTRELL**  
*Former names:*  
*Service Address:*              **12 KILMUIR  
BALMUIR  
BRIDGECastle  
BY BATHGATE  
EH48 3DP**

*Country/State Usually Resident:*   **SCOTLAND**

*Date of Birth:*   **30/05/1948**                      *Nationality:*   **BRITISH**  
*Occupation:*    **CHIEF NURSE**

---

*Company Director*      **3**

*Type:*                              **Person**  
*Full forename(s):*              **MR WILLIAM**  
*Surname:*                        **DAVIDSON**  
*Former names:*  
*Service Address:*              **14 NORTH FEUS  
UPPER LARGO  
LEVEN  
FIFE  
KY8 6ER**

*Country/State Usually Resident:*   **SCOTLAND**

*Date of Birth:*   **04/04/1948**                      *Nationality:*   **BRITISH**  
*Occupation:*    **DIRECTOR**

*Company Director*      **4**

*Type:*                              **Person**  
*Full forename(s):*              **MR SANDY**  
*Surname:*                        **MILNE**  
*Former names:*  
*Service Address:*              **101 BANKTON PARK EAST  
LIVINGSTON  
WEST LoTHIAN  
EH54 9BN**

*Country/State Usually Resident:*   **SCOTLAND**

*Date of Birth:*   **21/03/1949**                              *Nationality:*   **BRITISH**  
*Occupation:*    **RETIRED**

---

*Company Director*      **5**

*Type:*                              **Person**  
*Full forename(s):*              **MR PAUL**  
*Surname:*                        **THOMSON**  
*Former names:*  
*Service Address:*              **20 SPOTTISWOODE GARDENS  
MIDCALDER  
WEST LoTHIAN  
EH53 0JU**

*Country/State Usually Resident:*   **SCOTLAND**

*Date of Birth:*   **16/03/1955**                              *Nationality:*   **BRITISH**  
*Occupation:*    **POLICE OFFICER**

## Presenter information

---

*Contact Name:*

*Address:*

---

## *Authorisation*

*Authenticated*

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

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