



Companies House

AR01 (ef)

Annual Return



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Company Name: **CORRYVRECKAN LTD.**

Company Number: **SC269606**

Date of this return: **21/06/2015**

SIC codes: **01700**
58110
59113
60200

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

Situation of Registered Office: **KOMANI AROS MAINS**
AROS
ISLE OF MULL
ARGYLL
PA72 6JP

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **MS JULIET ELIZABETH**

Surname: **KNIGHT**

Former names:

Service Address: **KOMANI
AROS MAINS
ISLE OF MULL
PA72 6JP**

Company Director ***I***

Type: **Person**

Full forename(s): **MR GAETANO JOSEPH**

Surname: **GRIEVE**

Former names:

Service Address: **KOMANI
AROS MAINS
ISLE OF MULL
PA72 6JP**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **21/09/1973** *Nationality:* **BRITISH**

Occupation: **WRITER/ADVENTURER**

Company Director 2

Type: **Person**
Full forename(s): **MS JULIET ELIZABETH**

Surname: **KNIGHT**

Former names:

Service Address: **KOMANI
AROS MAINS
ISLE OF MULL
PA72 6JP**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **08/02/1969** *Nationality:* **BRITISH**
Occupation: **ADMINISTRATOR**

Statement of Capital (Share Capital)

Class of shares	ORDINARY	<i>Number allotted</i>	100
		<i>Aggregate nominal value</i>	100
<i>Currency</i>	GBP	<i>Amount paid per share</i>	0
		<i>Amount unpaid per share</i>	0

Prescribed particulars

EACH SHARE IS ENTITLED TO ONE VOTE IN ANY CIRCUMSTANCES

Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	100
		<i>Total aggregate nominal value</i>	100

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 21/06/2015 or that had ceased to be shareholders since the made up date of the previous Annual Return

A full list of shareholders for the company are shown below

Shareholding 1 : **50 ORDINARY shares held as at the date of this return**
Name: **JULIET ELIZABETH KNIGHT**

Shareholding 2 : **50 ORDINARY shares held as at the date of this return**
Name: **GAETANO JOSEPH GRIEVE**

Authorisation

Authenticated

This form was authorised by one of the following:

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