Companies House

AR01 (ef)

Annual Return

Received for filing in Electronic Format on the: **22/12/2015**

X4MRY5JE

Company Name:	**AVENUE COMMUNITY NURSING HOME LIMITED**
Company Number:	**01916601**
Date of this return:	**01/12/2015**
SIC codes:	**86102**
Company Type:	**Private company limited by guarantee**
Situation of Registered Office:	**47 THE AVENUE** **LINTHORPE** **MIDDLESBOROUGH** **CLEVELAND**

Single Alternative Inspection Location (SAIL)

The address for an alternative location to the company's registered office for the inspection of registers is:

C/O ANDERSON BARROWCLIFF LLP
WATERLOO HOUSE TEESDALE SOUTH
THORNABY
ENGLAND
TS17 6SA

The following records have moved to the single alternative inspection location:

Register of members (section 114)

Register of directors (section 162)

Register of secretaries (section 275)

Records of resolutions and meetings (section 358)

Officers of the company

Company Secretary 1

Type: **Person**

Full forename(s): **PATRICIA**

Surname: **FELLOWS**

Former names:

Service Address: **16 HEBRON ROAD**
MIDDLESBROUGH
CLEVELAND
TS5 6RD

Company Director 1

Type: **Person**

Full forename(s): **PATRICIA**

Surname: **FELLOWS**

Former names:

Service Address: **16 HEBRON ROAD**
MIDDLESBROUGH
CLEVELAND
TS5 6RD

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

Date of Birth: ****/03/1954** *Nationality:* **BRITISH**

Occupation: **DIRECTOR**

Company Director 2

Type: **Person**

Full forename(s): **DEBBIE**

Surname: **HARLAND**

Former names:

Service Address: **43 WOODLEA**
COULBY NEWHAM
MIDDLESBROUGH
CLEVELAND
TS8 0TX

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

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

Occupation: **DIRECTOR**

Company Director 3

Type: **Person**

Full forename(s): **MISS MIRIAM JUDITH**

Surname: **MCLAUGHLIN**

Former names:

Service Address: **44 HAYMORE STREET**
MIDDLESBROUGH
CLEVELAND
TS5 6JD

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

Date of Birth: ****/04/1953** *Nationality:* **BRITISH**

Occupation: **CARE ASSISTANT NVQ3**
DIRECTOR

Authorisation

Authenticated

This form was authorised by one of the following:

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