

HOUSE

THE REGISTRAR OF COMPANIES

COMPANIES HOUSE CROWN WA CARDIFF CF4 3UZ



COMPANIES HOUSE 09/10/96

This form should be completed in black.

The information printed below is taken from Companies House records as at 31/08/96 If this information requires amendment use the spaces

opposite.

of company number 01989172 R

company name
MOTOR NEURONE DISEASE (SALES) LIMITED

company type PRIVATE COMPANY LIMITED BY SHARES

Date of this return (See note 1)

The information in this return should be made up to a date not later than

Day	Month	Year
1,9	0 9	9,6

If you are making the return up to an earlier date, show the date here. Please note that the form must be delivered to Companies House within 28 days of this earlier date.

Day	Month Year		
	1		

Day Month Year

Date of next return (See note 2)

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.

Registered Office (See note 3)

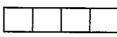
This is the address registered by Companies House.

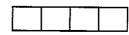
DAVID NIVEN HOUSE 10/15 NOTRE DAME MEWS NORTHAMPTON NN1 2BG

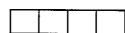
Principal business activities (See note 4)

Trade classification is 5261 RETAIL SALE VIA MAIL ORDER HOUSES

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







Register of members (See note 5)	details below and, for secretary and director particulars, the date of any change.					
The register is kept at	•					
The register is kept at						
REGISTERED OFFICE						
Register of debenture holders (See note 6)						
Any register of debenture holders (or duplicate) is kept at						
Company Secretary (See note 7)	Day Month Year					
Particulars of a new secretary must be notified on form 288.	Date of any change.					
CLINTON GEORGE						
LEVVY						
43 KENNETT ROAD HEADINGTON	,					
OXFORD						
OX3 7BH						
	Day Month Year					
If this person has ceased to be secretary, please	Date of resignation.					
state when.						
Directors (See note 7)	Day Month Year					
Particulars of a new director must be notified on	Date of any change.					
form 288.						
STEPHEN BLANEY						
LYNDHURST HAWKS HILL						
GUILDFORD ROAD						
LEATHERHEAD SURREY KT22 9DS						
Date of Birth:- 27/01/50						
Nat:BRITISH						
Occ:GROUP CHAIRMAN / CHIEF EXECUTI	Day Month Year					
If this person has ceased to be director, please state when.	Day Month Feat					
Show any relevant current and previous directorships.						

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*	01989172	If the information shown needs amendment, gividetails below and the date of any change.			
Directors - continued					date of any change.
Particulars. *		Day	Month	Year	1
ANDREW HAYES		<u> </u>	<u> </u>		Date of any change.
FLEESON THE GLADE AVENUE ROAD				*	
CRANLEIGH		••••••			
SURREY GU6 7LQ		*************		*******************	
·				•	
		*****************	······	······	
Date of Birth:- 12/05/45					
Nat:BRITISH			***************************************		
Occ:DIRECTOR		***************************************			
If this person has ceased to be director,	please	Day	Month	Year	1
state when.			<u></u>		Date of resignation.
Show any relevant current and previous	directorships.		*************		

Particulars.		Day	Month	Year	
CUDI CHORVED TOWN					Date of any change.
CHRISTOPHER JOHN HENSHAW					
13 LYNTON PARK ROAD		***************************************			
CHEADLE HULME		***************************************		************	
CHESHIRE SK8 6JA			***************************************		······································
		***************************************		••••••	
		************		•••••	
Date of Birth:- 23/02/69					
Nat:BRITISH		***************************************		·····	
Occ:TRAINEE SOLICITOR		-		***************************************	
If this person has ceased to be director, p	please	Day	Month	Year	
state when.					Date of resignation.
Show any relevant current and previous of	directorships.		*****		
		***************************************		*******************	
Particulars.		Day	Month	Year	
					Date of any change.
BARBARA WILKINSON					
TEW 45 LIMEFIELD ROAD		***************************************		•••••	
SMITHILLS					
BOLTON		****************		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
LANCASHIRE BL1 6LA		***************************************		**	
Date of Birth:- 29/06/42					
Nat:BRITISH Occ:DIRECTOR		***************************************			
			•••••		
If this person has ceased to be director, p	lease	Day	Month	Year	
state when.		/13	019	916	Date of resignation.
Show any relevant current and previous d	lirectorships.		*		

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If the information shown needs amendment, give details below and the date of any change.

Directors - continued	Day Month Year
Particulars.	Date of any change.
ADRIAN EDWARD ALEXANDER VAN LOO 11 GRIBDALE TERRACE GREAT AYTON MIDDLESBROUGH	
CLEVELAND TS9 6HN	
Date of Birth:- 30/09/46 Nat:BRITISH Occ:HEALTH SERVICE MANAGER	Day Month Year
If this person has ceased to be director, please state when.	150995 Date of resignation.
Show any relevant current and previous directorships.	
Particulars. CATHERINE JOAN	Day Month Year
WILLIAMS COROMANDEL 27 NEWHORTHORNS SMOCK ALLEY WEST CHILLINGTON PULBOROUGH WEST SUSSEX RH20 2QN	
Date of Birth:- 02/08/34 Nat:- BRITISH OCC:COMPANY DIRECTOR	
If this person has ceased to be director, please state when.	Day Month Year Date of resignation.
Show any relevant current and previous directorships.	
Particulars.	Day Month Year
NO MORE DIRECTORS - ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.	
If this parson has cassed to be director please	Day Month Year
If this person has ceased to be director, please state when.	Date of resignation.
Show any relevant current and previous directorships.	

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If the information shown needs amendment, give 01989172 details below and the date of any change. Directors - continued Day Month Year Particulars. * Date of any change. NO MORE DIRECTORS - ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a. Day Month Year If this person has ceased to be director, please state when. Date of resignation. Show any relevant current and previous directorships. Day Month Year Particulars. Date of any change. NO MORE DIRECTORS - ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a. Day Month Year If this person has ceased to be director, please state when. Date of resignation. Show any relevant current and previous directorships. Day Month Year Particulars. Date of any change. NO MORE DIRECTORS - ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a. Day Month Year If this person has ceased to be director, please

Date of resignation.

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state when.

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Show any relevant current and previous directorships.

Issued Share Capital (See note 8)	Class (eg Ordinary/ Preference etc.)	Number of shares issue	
Enter details of all shares in issue at the date of this return.	ORD.	F 1500 2	(ie Number of shares issued multiplied by nominal value per share)
	Totals		- £1_
List of past and present members (See note 9) (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two returns. The last full members list was at 19/09/95	There were no	changes in the p	Please mark the appropriate box.
			not on
	A list of chang	es is enclosed	on paper paper
	A full list of me	embers is enclose	ed 📗
Elective resolutions (See note 10) (Private companies only) If an elective resolution is in force at the date of this return to dispense with annual general meetings, mark this box. If an elective resolution is in force at the date of this return to dispense with laying accounts in general meetings, mark this box.			
Certificate	Signed	Aus	<i>y</i>
I certify that the information given in this return is true to the best of my knowledge and belief.	Date //	19/96	Secretary/Director * *(delete as appropriate) JIRECTUR OF
I enclose the fee of £ 18.	This return in	/ //	Salves Services continuation sheets.
Cheques should be made payable to Companies House.	Please en	(enter numb	er) have completed
To whom should Companies House direct any enquiries about the information shown in this return?	DIRECTUR DAVID NIVEN NORTHAMP	House 10-15 1	7 FELVICES NOTRE DAME CIQLE Ide MY 1 2 PR
	Telephone	01604 25050) J Ext 255

LIST OF PAST AND PRESENT MEMBERS SCHEDULE TO FORM 363 Account of Shares Company Number 01989172 Particulars of shares transferred Number of since the date of the last return, shares or Company Name: or, in the case of the first return, amount of MOTOR NEURONE DISEASE (SALES) LIMITED since the incorporation of the stock held company, by by existing (a) persons who are still members at members, and date of this (b) persons who have return. ceased to be members. Number Date of Number Name and address Currently Registration Remarks Transferred of Transfer Held

LIST OF PAST AND PRESENT MEMBERS (continued) SCHEDULE TO FORM 363

ST OF PAST AND PRESENT MEMBERS (continued) SCHEDOL				TO FUNIVI 303		
Company Number: 01989172	Number of	Particulars of s	ount of Shares nares transferred of the last return,	· -		
Company Name: MOTOR NEURONE DISEASE (SALES) LIMITED	shares or amount of stock held		of the first return,	•		
	by existing members at	(a) persons who are still members, and				
	date of this return.					
	Number		Date of	i		
Name and address	Currently Held	Number Transferred	Registration of Transfer	Remarks		
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