

Companies House

• — for the record -

Company Name **RIVER VALLEY CENTRE**

Company Type **Private Company Limited By Guarantee Without Share Capital** Company Number 2151283 Information extracted from Companies House records on 5th October 1999

activity codes.

363s Annual Return

> Please check the details printed in blue on this statement.

> If any details are wrong, strike them through and write the o in the "Amended details" column.

> Please use black pen and write in c

COMPANIES HOUSE

Section 1: Company details

COMPANIES HOUSE 29/10/99 COMPANIES HOUSE 16/10/99

| Ref: 2151283/15/42 | Current details : | Amended details |
|---|--|--|
| Registered Office Address If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column. | 6 White Horse Drive Emerson Valley Milton Keynes MK4 2AS | Address UK Postcode |
| Register of Members if any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column. | Address where the Register is held 1 Colston Bassor Emerson Valley Milton Keynes Buoks MK4 2BO | Address 14 HAWK LINGIG FULZTON MILTON KITYNISS UK Postcode MKLY IBA. Address UK Postcode |
| Register of Debenture Holders If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column. | Not Applicable | |
| Principal Business Activities If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column. | SIC Code Description 8532 Social work without accommodation | SIC CODE Description |
| If no entries are shown, please enter principal activity code(s) in "Amended details" column. See notes for guidance for list of | | |

| | 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. | Name Wendy Jane CROSS | Name Lollaris CLALS WILSON |
| | Address 14 Hawkridge Furzton Milton Keynes Buckinghamenire | Address S ARBBATH CLOSE WEST BUSTCHUCY MUTON WEYMS UK Postcode MK3 75I |
| Particulars of a new Company Secretary must be notified on form 288. | MK4 1BQ | Date of change / / Date Wendy Jane CROSS ceased to be secretary (if applicable) |
| Director If any of the details for this person are wrong, strike them through and fill in the | Name Denise CARINI | Name |
| correct details in the "Amended details" column. | Address 1 Beufort Drive Willen Milton Keynes Buckinghamshire Date of birth 08/07/1961 | UK Postcode |
| Particulars of a new Director must be notified on form 288. | Nationality British Occupation Sad | Date of change / / Date Denise CARINI ceased to be director (if applicable) Colum 2003 |
| 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. | Name Roger GOODSHIP Address 1 Colston Bassett Emerson Valley Milton Keynes Buckinghamshire MK4 2BU | Name Address UK Postcode |
| | Date of birth 08/08/1953 Nationality British | Date of birth / / |
| Particulars of a new Director must be notified on form 288. | Occupation Self Employed | Date Roger GOODSHIP ceased to be director (if applicable) |

Company Number - 2151283 Section 2: Details of Officers of the Company (continued) Amended details Current details Director Name Name **Christine MERRIMAN** *If any of the details for this person are wrong, strike Address them through and fill in the correct details in the **Address** "Amended details" column. 13 Hawkridge **Furzton** Milton Keynes Buckinghamshire UK Postcode MK4 1BH Date of birth _ _ / _ _ / _ _ _ _ Nationality Date of birth 08/12/1957 Occupation **Nationality British** Date of change _ _ / _ _ / _ _ _ _ Occupation Teacher Particulars of a new Director Date Christine MERRIMAN ceased to must be notified on form be director (if applicable) 288. Director Name Name Lorraine Clare WILSON If any of the details for this person are wrong, strike Address them through and fill in the TATH 14 HAWKRIDGE correct details in the **Address** "Amended details" column. 51 Winsford Hill Furzton | MILTON KINS) Milton Keynes Buckinghamshire **UK Postcode** MK4 1BL Date of birth _ _ / _ _ / _ _ _ _

Date of birth 15/07/1968

Occupation Director

British

Nationality

Particulars of a new Director must be notified on form

288.

Nationality

Occupation

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

Date Lorraine Clare WILSON ceased to

___/___

be director (if applicable)

Company Number - 2151283 Companies House —— for the record ——

363s Annual Return Declaration

When you have checked all the sections of this form, please complete this page and tick 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 According (Director / Se | ecretary) | | Date 13 / 19 / 19 9 9 This date must not be earlier than the return date at 2 below | |
| | What to do now Please detach and retain the covering letter, 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 | <i>*</i> | | | |
| | | If you are making this return up to an earlier date, please give the date here | | | |
| | | <u> </u> | _ / | / | |
| | | Note: The fo | orm must be | delivered to CH within 28 days of this date | |
| 3. | . Date of next return | | | | |
| | If you wish to change your r please give the new date he | ere: | | earlier than 30th January 2000 | |
| 4 | . Where to send this forn | n | | | |
| | Please return this form to: Registrar of Companies Companies House Crown Way Cardiff CF14 3UZ | | | | |
| | Have you enclosed the filing fee with the company number written on the reverse of the cheque? | | | | |
| | Cheque 🗹 Postal Orde | er 🗆 | Cheque / Number | Postal Order | |
| | (Please complete as approp | oriate) | | | |
| С | ontact Address | | | | |
| | ase give the name and addre re are any queries about this | | person wh | o should be contacted if | |
| | ntact Name CHUI MUSILIMAN | | • | ne number <i>inc code</i> | |
| Address 13 HAWK LINGE | | | DX number <i>if applicable</i> | | |
| : | FURZION KEYNES | 5 | DX excha | ange | |
| Pos | stcode MKY 1 | BH | | | |