



**Companies House**  
— for the record —

**AR01** (ef)

**Annual Return**



Received for filing in Electronic Format on the: **04/02/2010**

XPQ9GH8Q

*Company Name:* **CHRISTIAN BLIND MISSION (UNITED KINGDOM) LIMITED**

*Company Number:* **03148424**

*Date of this return:* **19/01/2010**

*SIC codes:* **9133**

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

*Situation of Registered Office:* **VISION HOUSE  
7-8 OAKINGTON BUSINESS PARK  
DRY DRAYTON ROAD OAKINGTON  
CAMBRIDGE  
CB24 5BD**

**Officers of the company**

*Company Secretary* **1**

*Type:* **Person**

*Full forename(s):* **BRIAN ALLAN**

*Surname:* **HALL**

*Former names:*

*Service Address:* **LODGE COTTAGE  
CHURCH STREET HEMINGFORD GREY  
HUNTINGDON  
PE28 9DE**

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*Company Director* **1**

*Type:* **Person**

*Full forename(s):* **SARAH VIRGINIA**

*Surname:* **BRINTON**

*Former names:*

*Service Address:* **128 LANGLEY ROAD  
WATFORD  
UNITED KINGDOM  
WD17 4RR**

*Country/State Usually Resident:* **ENGLAND**

*Date of Birth:* **01/04/1955**

*Nationality:* **BRITISH**

*Occupation:* **DIRECTOR**

*Company Director*      **2**

*Type:*                              **Person**

*Full forename(s):*              **TIMOTHY**

*Surname:*                        **BROOKS**

*Former names:*

*Service Address:*              **6 NEWMAN COURT  
HEMINGFORD GREY  
HUNTINGDON  
CAMBRIDGESHIRE  
PE28 9WJ**

*Country/State Usually Resident:*   **ENGLAND**

*Date of Birth:*   **05/04/1964**

*Nationality:*   **BRITISH**

*Occupation:*    **CONSULTANT**

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*Company Director*      **3**

*Type:*                              **Person**

*Full forename(s):*              **JOHN**

*Surname:*                        **FOSTER**

*Former names:*

*Service Address:*              **COLISTRITTEN  
ARVA  
COUNTY CAVAN  
IRISH**

*Country/State Usually Resident:*   **IRELAND**

*Date of Birth:*   **18/09/1953**

*Nationality:*   **BRITISH**

*Occupation:*    **PHARMACIST**

## *Company Director 4*

*Type:* **Person**  
*Full forename(s):* **BRIAN ALLAN**  
*Surname:* **HALL**  
*Former names:*  
*Service Address:* **LODGE COTTAGE  
CHURCH STREET HEMINGFORD GREY  
HUNTINGDON  
PE28 9DE**

*Country/State Usually Resident:* **ENGLAND**

*Date of Birth:* **15/08/1947** *Nationality:* **BRITISH**  
*Occupation:* **SOLICITOR**

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## *Company Director 5*

*Type:* **Corporate**  
*Name:* **CHRISTIAN BLIND MISSION INTERNATIONAL**  
*Registered or principal address:* **SEESTRASSE 160 CH-8027  
ZURICH  
CH8027  
FOREIGN**

## *European Economic Area (EEA) Company*

*Register Location:* **ZURICH**  
*Registration Number:* **CH-020.6.900.081-1**

## *Authorisation*

*Authenticated*

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

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