



Companies House

AR01 (ef)

Annual Return



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X4C6RHG2

Company Name: **ALLIANCE OF REGISTERED HOMEOPATHS LIMITED**

Company Number: **04241422**

Date of this return: **25/06/2015**

SIC codes: **94120**

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

Situation of Registered Office: **MILLBROOK
MILLBROOK HILL
NUTLEY
EAST SUSSEX
TN22 3PJ**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **MRS JUNE GEORGINA**

Surname: **SAYER**

Former names:

Service Address: **KETLEY 169 HOCKLEY ROAD
RAYLEIGH
ESSEX
SS6 8BH**

Company Director ***I***

Type: **Person**

Full forename(s): **KARIN**

Surname: **MONT**

Former names:

Service Address: **MILLBROOK FARM
NUTLEY
UCKFIELD
EAST SUSSEX
TN22 3PJ**

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

Date of Birth: **07/01/1954** *Nationality:* **BRITISH**

Occupation: **HOMEOPATH**

Company Director 2

Type: **Person**
Full forename(s): **DAVID BERNARD**

Surname: **NEEDLEMAN**

Former names:

Service Address: **22 THE SPINNEY
STANMORE
MIDDLESEX
HA7 4QJ**

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

Date of Birth: **13/07/1947** *Nationality:* **BRITISH**
Occupation: **HOMEOPATH**

Company Director **3**

Type: **Person**

Full forename(s): **MRS JUNE GEORGINA**

Surname: **SAYER**

Former names:

Service Address: **KETLEY 169 HOCKLEY ROAD
RAYLEIGH
ESSEX
SS6 8BH**

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

Date of Birth: **15/08/1951**

Nationality: **BRITISH**

Occupation: **HOMEOPATH**

Company Director 4

Type: **Person**
Full forename(s): **STEVEN PHILIP**

Surname: **SCRUTTON**

Former names:

Service Address: **15 MANITOBA CLOSE
CORBY
NORTHAMPTONSHIRE
NN18 9HX**

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

Date of Birth: **25/05/1946** *Nationality:* **BRITISH**
Occupation: **HOMEOPATH**

Company Director **5**

Type: **Person**

Full forename(s): **DR MYRIAM MIRA**

Surname: **SHIVADIKAR**

Former names:

Service Address: **4 INGLEWAY INGLEWAY
FINCHLEY
LONDON
ENGLAND
N12 0QJ**

Country/State Usually Resident: **LONDON**

Date of Birth: **27/05/1964**

Nationality: **BRITISH**

Occupation: **HOMEOPATH**

Authorisation

Authenticated

This form was authorised by one of the following:

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