



**Confirmation Statement**

Company Name: **Eclipse Veterinary Software Limited**

Company Number: **07185874**



Received for filing in Electronic Format on the: **13/03/2017**

X623T7NE

Company Name: **Eclipse Veterinary Software Limited**

Company Number: **07185874**

Confirmation **11/03/2017**

Statement date:

## Statement of Capital (Share Capital)

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<b>Class of Shares:</b>	<b>ORDINARY</b>	Number allotted	<b>2000</b>
	<b>1 GBP</b>	Aggregate nominal value:	<b>2000</b>
Currency:	<b>GBP</b>		

Prescribed particulars

**ALL SHARES HAVE EQUAL RIGHTS TO VOTING, PROFITS, DISTRIBUTIONS AND CAPITAL.**

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## Statement of Capital (Totals)

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Currency:	<b>GBP</b>	Total number of shares:	<b>2000</b>
		Total aggregate nominal value:	<b>2000</b>
		Total aggregate amount unpaid:	<b>0</b>

# Persons with Significant Control (PSC)

## PSC notifications

### Notification Details

Date that person became **06/04/2016**  
registrable:

Name: **MS JEANNE FRANCES RAZZELL**

Service Address: **SKYE HOUSE 4- 6 CHESTERFORD COURT  
GREAT CHESTERFORD  
SAFFRON WALDEN  
ESSEX  
ENGLAND  
CB10 1PF**

Country/State Usually  
Resident: **ENGLAND**

Date of Birth: **\*\*/04/1956**

Nationality: **BRITISH**

### Nature of control

The person holds, directly or indirectly, more than 25% but not more than 50% of the shares in the company.

## Notification Details

Date that person became **06/04/2016**  
registrable:

Name: **DR BRIAN WHITT**

Service Address: **SKYE HOUSE 4- 6 CHESTERFORD COURT  
GREAT CHESTERFORD  
SAFFRON WALDEN  
ESSEX  
ENGLAND  
CB10 1PF**

Country/State Usually  
Resident: **ENGLAND**

Date of Birth: **\*\*/09/1960**

Nationality: **BRITISH**

## Nature of control

The person holds, directly or indirectly, more than 25% but not more than 50% of the shares in the company.

## **Confirmation Statement**

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

# Authorisation

Authenticated

This form was authorised by one of the following:

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