



Confirmation Statement

Company Name: **LEARNING ACADEMY PARTNERSHIP (SOUTH WEST)**

Company Number: **07713540**



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Company Name: **LEARNING ACADEMY PARTNERSHIP (SOUTH WEST)**

Company Number: **07713540**

Confirmation **26/09/2016**

Statement date:

Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became registrable: **31/08/2016**

Name: **MR DUNCAN JOHN FORD HADDRELL**

Service address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/06/1968**

Nationality: **BRITISH**

Nature of control

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

Notification Details

Date of becoming a
registrable RLE: **01/08/2016**

Name: **UNIVERSITY OF ST MARK AND ST JOHN**

Registered or Principal
Office Address: **UNIVERSITY OF ST MARK AND ST JOHN DERRIFORD
ROAD
DERRIFORD
PLYMOUTH
ENGLAND
PL6 8BH**

Legal Form: **PRIVATE LIMITED COMPANY BY GUARANTEE**

Governing Law: **COMPANIES ACT 2006**

Register: **COMPANIES HOUSE ENGLAND**

Country/state of register: **ENGLAND**

Registration Number: **07635609**

Nature of control

The relevant legal entity holds, directly or indirectly, more than 25% but not more than 50% of the voting rights in the company.

Notification Details

Date of becoming a registrable RLE: **06/04/2016**

Name: **EXETER DIOCESAN EDUCATION NETWORK**

Registered or Principal Office Address: **THE DEANERY THE CLOISTERS, CATHEDRAL CLOSE
EXETER
ENGLAND
EX1 1HS**

Legal Form: **CHURCH OF ENGLAND DIOCESE**

Governing Law: **COMPANY LAW 2006**

Register: **COMPANIES HOUSE ENGLAND**

Country/state of register: **ENGLAND**

Registration Number: **07712752**

Nature of control

The relevant legal entity holds, directly or indirectly, more than 25% but not more than 50% of the voting rights in the company.

Ceased as PSC

Date ceased: **31/08/2016**
Name: **MR JAMES MAXWELL GRIFFITHS CROSS**
Date of Birth: ****/08/1963**

Date ceased: **06/04/2016**
Name: **MR PETER REEVE**
Date of Birth: ****/11/1961**

Date ceased: **31/08/2016**
Name: **MRS SALLY ANN TIMMINS**
Date of Birth: ****/12/1967**

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