



#### **Confirmation Statement**

Company Name:FLYING COLOURS NURSERIES LIMITEDCompany Number:SC527586

Received for filing in Electronic Format on the: 27/02/2024

Company Name: FLYING COLOURS NURSERIES LIMITED

Company Number: SC527586

Confirmation **22/02/2024** 

Statement date:



XCXRRJMG

## **Statement of Capital (Share Capital)**

Class of Shares:	ORDINARY	Number allotted	100	
Currency:	GBP	Aggregate nominal value:	100	
Prescribed particulars				

SHARES HAVE FULL VOTING RIGHTS AND ARE ENTITLED TO ATTEND ANY MEMBERS MEETINGS OR VOTE ON ANY MEMBERS RESOLUTIONS OF THE COMPANY. DIVIDENDS MAY BE PAID TO THE HOLDERS OF ONE OR MORE CLASSES OF SHARES TO THE EXCLUSION OF THE OTHER(S) OR TO ALL CLASSES OF SHARES, IN EACH CASE AT THE SAME OR DIFFERING RATES, AS DETERMINED BY ORDINARY RESOLUTION. DISTRIBUTION ON A WINDING UP SHARES OF ALL CLASSES RANK EQUALLY.

# **Statement of Capital (Totals)**

Currency:	GBP	Total number of shares:	100
		Total aggregate nominal value:	100
		Total aggregate amount	0
		unpaid:	

# **Full details of Shareholders**

The details below relate to individuals/corporate bodies that were shareholders during the review period or that had ceased to be shareholders since the date of the previous confirmation statement.

Shareholder information for a non-traded company as at the confirmation statement date is shown below

Shareholding 1: Name:	45 ORDINARY shares held as at the date of this confirmation statement ARRAN BLACK
Shareholding 2: Name:	10 ORDINARY shares held as at the date of this confirmation statement MILO BLACK
Shareholding 3:	5 transferred on 2023-07-23 0 ORDINARY shares held as at the date of this confirmation statement
Name:	EARL BLACK
Shareholding 4: Name:	45 ORDINARY shares held as at the date of this confirmation statement LAURA MONICA PERRY
Shareholding 5:	5 transferred on 2023-07-23 0 ORDINARY shares held as at the date of this confirmation statement
Name:	SUE BLACK

## **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