Companies House

AR01 (ef)

Annual Return

Received for filing in Electronic Format on the: **20/05/2015**

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Company Name:	**THE NATIONAL INSTITUTE OF MEDICAL HERBALISTS**
Company Number:	**00044483**
Date of this return:	**14/05/2015**
SIC codes:	**86900**
Company Type:	**Private company limited by guarantee**
Situation of Registered Office:	**CLOVER HOUSE JAMES COURT SOUTH STREET EXETER EX1 1EE**

Officers of the company

Company Director 1

Type: **Person**

Full forename(s): **DEIRDRE ADA**

Surname: **ATKINSON**

Former names:

Service Address: **46 INVERLEITH ROW**
EDINBURGH
EH3 5PY

Country/State Usually Resident: **SCOTLAND**

Date of Birth: **26/07/1961** *Nationality:* **BRITISH**

Occupation: **MEDICAL HERBELIST**

Company Director 2

Type: **Person**

Full forename(s): **MRS KATHERINE ANNE**

Surname: **BELLCHAMBERS-WILSON**

Former names:

Service Address recorded as Company's registered office

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

Date of Birth: **01/10/1968** *Nationality:* **BRITISH**

Occupation: **MEDICAL HERBALIST**

Company Director 3

Type: **Person**

Full forename(s): **MRS HANANJA**

Surname: **BRICE-YTSMA**

Former names: **YTSMA**

Service Address recorded as Company's registered office

Country/State Usually Resident: **GREAT BRITAIN**

Date of Birth: **10/03/1961** *Nationality:* **DUTCH**

Occupation: **MEDICAL HERBALIST**

Company Director 4

Type: **Person**
Full forename(s): **MRS LAURA**

Surname: **CARPENTER**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **WALES**

Date of Birth: **25/10/1983** *Nationality:* **BRITISH**
Occupation: **MEDICAL HERBALIST**

Company Director 5

Type: **Person**
Full forename(s): **MISS NATHALIE**

Surname: **CHUNG**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: **25/02/1978** *Nationality:* **BRITISH**
Occupation: **MEDICAL HERBALIST**

Company Director *6*

Type: **Person**

Full forename(s): **MR EUAN JAMES ALASDAIR**

Surname: **MACLENNAN**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: **01/04/1975** *Nationality:* **BRITISH**

Occupation: **MEDICAL HERBALIST**

Company Director 7

Type: **Person**

Full forename(s): **DR BARBARA ANN**

Surname: **PENDRY**

Former names:

Service Address: **2 CAVENDISH ROAD**
BARNET
EN5 4DZ

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

Date of Birth: **07/03/1948** *Nationality:* **BRITISH**

Occupation: **SENIOR LECTURER**

Company Director 8

Type: **Person**
Full forename(s): **MRS LAURA MARY**

Surname: **STANNARD**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: **31/08/1958** *Nationality:* **IRISH**
Occupation: **MEDICAL HERBALIST**

Company Director 9

Type: **Person**
Full forename(s): **ROSEMARY**

Surname: **WESTLAKE**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **WALES**

Date of Birth: **25/05/1957** *Nationality:* **BRITISH**
Occupation: **MEDICAL HERBALIST**

Authorisation

Authenticated

This form was authorised by one of the following:

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