

AR01 (ef)

Annual Return



Received for filing in Electronic Format on the: 21/05/2010

Company Name: AGROSPRAY MIDLANDS LIMITED

Company Number: 01019064

Date of this return: 19/05/2010

SIC codes: 0141

Company Type: Private company limited by shares

Situation of Registered

39 MAIN STREET Office: **NETHERSEAL**

SWADLINCOTE DERBYSHIRE DE12 8DB

Officers of the company

Company Secretary

Type: Person

Full forename(s): MRS CHRISTINE

Surname: **WILLIAMS**

Former names:

Service Address recorded as Company's registered office

Company Director

Type: Person

MRS CHRISTINE *Full forename(s):*

Surname: **WILLIAMS**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: ENGLAND

Date of Birth: 06/09/1944 Nationality: BRITISH

Occupation: **SECRETARY**

2 Company Director

Type: Person

MR LESLIE NEIL Full forename(s):

WILLIAMS Surname:

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: ENGLAND

Nationality: BRITISH Date of Birth: **25/11/1947**

AGRICULTURAL Occupation:

CONTRACTOR

Statement of Capital (Share Capital)

Class of shares	ORDINARY	Number allotted Aggregate nominal value	100 100
Currency	GBP	Amount paid per share Amount unpaid per share	1 0
Prescribed particulars	EQUAL VOTING RIGHTS. RIG EMPTION RIGHTS (WHERE A EXISTING MEMBERS, FIRST).	N ISSUE OF NEW SHARES MU	VIDEND DISTRIBUTION. PRE- UST BE ISSUED TO THE

Statem	ent of Capital (Totals)		
Currency	GBP	Total number of shares	100	
		Total aggregate nominal value	100	

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 19/05/2010 or that had ceased to be shareholders since the made up date of the previous Annual Return

A full list of shareholders for a private or non-traded public company are shown below

Shareholding:1

75 ORDINARY Shares held as at 19/05/2010

Name: LESLIE NEIL WILLIAMS

Address:

Share.	hol	dino	2
DRUGICA	$\iota \cup \iota$	MILLE	/,

25 ORDINARY Shares held as at 19/05/2010

Name: **CHRISTINE WILLIAMS**

Address:

Authorisation

Authenticated

This form was authorised by one of the following:

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