



Companies House

for the record

Company Name

**BRITISH UNIVERSITIES
ACCOMMODATION CONSORTIUM
LIMITED**

Company Type

**Private Company Limited By
Guarantee Without Share Capital**

Company Number

1370080

Information extracted from
Companies House records on
3rd August 2001

363s Annual Return

- > Please check the details printed in blue on this statement.
- > If any details are wrong, strike them through and write the correct details in the "Amended details" column.
- > Please use black pen and write in capitals.



ED9
COMPANIES HOUSE

0029
30/08/01

Section 1: Company details

Ref: 1370080/15/42

	Current details	Amended details																				
> Registered Office Address <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	University Of Nottingham University Park Nottingham Nottinghamshire NG7 2RD	Address UK Postcode _ _ _ _ _																				
> Register of Members <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Address where the Register is held University Of Nottingham University Park Nottingham Nottinghamshire NG7 2RD	Address UK Postcode _ _ _ _ _																				
> Register of Debenture Holders <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Not Applicable	Address UK Postcode _ _ _ _ _																				
> Principal Business Activities <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	<table border="1"> <thead> <tr> <th>SIC Code</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>5511</td> <td>Hotels & motels, with restaurant</td> </tr> <tr> <td>9305</td> <td>Other service activities</td> </tr> </tbody> </table>	SIC Code	Description	5511	Hotels & motels, with restaurant	9305	Other service activities	<table border="1"> <thead> <tr> <th>SIC CODE</th> <th>Description</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	SIC CODE	Description												
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> Please enter additional principal activity code(s) in "Amended details" column. See notes for guidance for list of activity codes.																						

	Current details	Amended details
> Company Secretary <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Company Secretary must be notified on form 288.</i>	Name Jill Patricia COURT Address 5 Northfield Loke Barnham Broom Road Wymondham Norfolk NR18 0RP	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of change _ _ / _ _ / _ _ _ _ Date Jill Patricia COURT ceased to be secretary (if applicable) _ _ / _ _ / _ _ _ _
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name Jill Patricia COURT Address 5 Northfield Loke Barnham Broom Road Wymondham Norfolk NR18 0RP Date of birth 12/04/1964 Nationality British Occupation Conference Manager	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Jill Patricia COURT ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name Elizabeth Jane CRAWFORD Address Eastwyke House Abingdon Road Oxford Oxfordshire OX1 4PS Date of birth 27/02/1952 Nationality British Occupation Bursar	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Elizabeth Jane CRAWFORD ceased to be director (if applicable) _ _ / _ _ / _ _ _ _

	Current details	Amended details
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. <i>Particulars of a new Director must be notified on form 288.</i>	Name Dr John Charles HORABIN Address Birk Brae Blebo Craigs Cupar Fife Scotland KY15 5UG Date of birth 13/02/1945 Nationality British Occupation Director	Name _____ Address _____ _____ _____ UK Postcode _____ Date of birth ____ / ____ / ____ Nationality _____ Occupation _____ Date of change ____ / ____ / ____ Date Dr John Charles HORABIN ceased to be director (if applicable) ____ / ____ / ____
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. <i>Particulars of a new Director must be notified on form 288.</i>	Name Dawn HUNTER-ELLIS Address 4 Southend South Road Durham City County Durham DH1 3TG Date of birth 21/08/1955 Nationality British Occupation Sales And Marketingmanager	Name _____ Address _____ _____ _____ UK Postcode _____ Date of birth ____ / ____ / ____ Nationality _____ Occupation _____ Date of change ____ / ____ / ____ Date Dawn HUNTER-ELLIS ceased to be director (if applicable) ____ / ____ / ____
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. <i>Particulars of a new Director must be notified on form 288.</i>	Name Robert Christopher MATTHEWS Address 2 Baron Road Penarth South Glamorgan CF64 3UD Date of birth 19/07/1958 Nationality British Occupation Conference Manager	Name _____ Address _____ _____ _____ UK Postcode _____ Date of birth ____ / ____ / ____ Nationality _____ Occupation _____ Date of change ____ / ____ / ____ Date Robert Christopher MATTHEWS ceased to be director (if applicable) ____ / ____ / ____

> Director

If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.

Particulars of a new Director must be notified on form 288.

Current details

Name

Peter Anthony ROGERS

Address

3 Third Cross Road
Twickenham
Middlesex
TW2 5DY

Date of birth 08/05/1956

Nationality British

Occupation Company Director

Amended details

Name

Address

UK Postcode _ _ _ _ _

Date of birth _ _ / _ _ / _ _ _ _

Nationality _ _ _ _ _

Occupation _ _ _ _ _

Date of change _ _ / _ _ / _ _ _ _

Date Peter Anthony ROGERS ceased to
be director (if applicable)

_ _ / _ _ / _ _ _ _



Companies House

— for the record —

363s Annual Return Declaration

- > When you have checked all the sections of this form, please complete this page and sign the declaration below.
- > If you want to change the made up date of this annual return, please complete 2 below.

1. Declaration

- ☐ I confirm that the details in this annual return are correct as at the made-up-date (shown at 2 below). I enclose the filing fee of £15.

Signature

(Director / ~~Secretary~~)

Date

19/08/2001

This date must not be earlier than the return date at 2 below

What to do now

Complete this page then send the whole of the Annual Return and the declaration to the address shown at 4 below.

2. Date of this return

- ☐ This AR is made up to 19/8/2001
- If you are making this return up to an earlier date, please give the date here

__ / __ / ____

Note: The form must be delivered to CH within 28 days of this date

3. Date of next return

- ☐ If you wish to change your next return to a date earlier than **19th August 2002** please give the new date here:

__ / __ / ____

4. Where to send this form

- ☐ Please return this form to:

Registrar of Companies
Companies House
Crown Way
Cardiff CF14 3UZ

OR

For members of the Hays Document
Exchange service
DX 33050 Cardiff

Have you enclosed the filing fee with the company number written on the reverse of the cheque?

Cheque

☐

Postal Order

☐

Cheque / Postal Order

Number

(Please complete as appropriate)

Contact Address

Please give the name and address of the person who should be contacted if there are any queries about this form.

Contact Name

Telephone number *inc code*

Address

DX number *if applicable*

DX exchange

Postcode