

COMPANIES HOUSE

of company number

01523421

Q

company name

NU

NORTH SEA MEDICAL CENTRE LIMITED

company type PRIVATE COMPANY LIMITED BY SHARES

COMPANIES HOUSE CROWN WAY CARDIFF CF4 3UZ

THE REGISTRAR OF COMPANIES

This form should be completed in black.

The information printed below is taken from Companies House records as at 10/09/97 If this information requires amendment use the spaces opposite.

Date of this return (See note 1)

The information in this return should be made up to a date not later than

	Day	Month	Year	
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Date of next return (See note 2)

If you wish to make your next return to a date earlier than the anniversary of this return please show the date here. Companies House will then send a form at the appropriate time.

R	eai	isteı	red	Of	fice	(See	note .	3

This is the address registered by Companies House. 2 BLOOMSBURY STREET LONDON WC1B 3ST

Principal business activities (See note 4)

Trade classification is 8512 MEDICAL PRACTICE ACTIVITIES

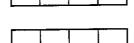
If the code cannot be determined from the notes, give a brief description of principal activity.

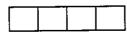
If you are making the return up to an earlier date, show the date here. Please note that the form must be delivered to Companies House within 28 days of this earlier date.

Day	Month	Year	

Day	Month	Year	
<u> </u>	i 1	-	

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Register of members (See note 5)	details below and, for secretary and director particulars, the date of any change.
The register is kept at	
16/17 SOUTH QUAY GT YARMOUTH NORFOLK NR30 2RA	······································
Register of debenture holders (See note 6)	
Any register of debenture holders (or duplicate) is kept at	
16/17 SOUTH QUAY GT YARMOUTH NORFOLK	
Company Secretary (See note 7)	Day Marth Voc
Particulars of a new secretary must be notified on form 288.	Day Month Year
PHILIP CHARLES SMITH 21 BRACON ROAD BELTON GREAT YARMOUTH NORFOLK NR31 9PS	
If this person has ceased to be secretary, please state when.	Day Month Year
Directors (See note 7)	
Particulars of a new director must be notified on form 288. CHRISTOPHER HENRY BROOKINGS 48 HIGH ROAD GORLESTON GREAT YARMOUTH NORFOLK NR31 OPE	Day Month Year Date of any change.
Date of Birth:- 03/04/47 Nat:BRITISH Occ:MEDICAL PRACTITIONER	
If this person has ceased to be director, please state when.	Day Month Year Date of resignation.
Show any relevant current and previous directorships.	

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If the information shown needs amendment, give details below and the date of any change.

Directors - continued	Day Month Year
Particulars.	Date of any change.
DR ANDREW PAUL COLVIN 5 YALLOP AVENUE GORLESTON GREAT YARMOUTH NORFOLK NR31 6HA	
Date of Birth:- 28/06/60 Nat:BRITISH OCC:GENERAL REGISTERED MEDICAL PRA If this person has ceased to be director, please state when.	Day Month Year Date of resignation.
Show any relevant current and previous directorships.	
Particulars. NEIL MICHAEL LIVINGSTONE 15 PARK ROAD GORLESTON GREAT YARMOUTH NORFOLK NR31 6EJ	Day Month Year Date of any change.
Date of Birth:- 30/04/44 Nat:BRITISH OCC:MEDICAL PRACTITIONER If this person has ceased to be director, please state when.	Day Month Year
Show any relevant current and previous directorships.	
Particulars.	Day Month Year Date of any change.
DR WILLIAM JOHN LOCKETT 14 CLIFF AVENUE GORLESTON GREAT YARMOUTH NORFOLK NR31 6EQ	
Date of Birth:- 18/02/58 Nat:BRITISH OCC:GENERAL REGISTERED MEDICAL PRA	
If this person has ceased to be director, please state when.	Day Month Year Date of resignation.
Show any relevant current and previous directorships.	

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If the information shown needs amendment, 'give 01523421 details below and the date of any change. Day Month Year Date of any change. Date of Birth: - 20/08/40 Occ: MEDICAL PRACTITIONER Day Month Year If this person has ceased to be director, please Date of resignation. Show any relevant current and previous directorships. Day Month Year Date of any change. ACORN FIELDS BACK LANE Date of Birth: - 23/12/46 Occ:GENERAL MEDICAL PRACTITIONER Day Month Year If this person has ceased to be director, please Date of resignation. Show any relevant current and previous directorships. Day Month Year Date of any change. Date of Birth: - 02/06/53 Occ: GENERAL MANAGER MEDICAL CENTRE Day Month

Year

Date of resignation.

PAGE

state when.

Directors - continued

NORMAN KEITH IAN

3 YALLOP AVENUE

Particulars.

MCIVER

GORLESTON GREAT YARMOUTH NORFOLK NR31 6HA

Nat: BRITISH

state when.

Particulars.

LOUND LOWESTOFT

state when.

Particulars.

SMITH

BELTON

PHILIP CHARLES

21 BRACON ROAD

GREAT YARMOUTH NORFOLK NR31 9PS

Nat: BRITISH

If this person has ceased to be director, please

Show any relevant current and previous directorships.

SUFFOLK NR32 5NE

Nat: BRITISH

DR THOMAS PACE

01523421

If the information shown needs amendment, give details below and the date of any change.

Directors - continued	Day Month Year
Particulars.	Day Month Year Date of any change.
DAVID GRAHAM WATSON 54 WARREN ROAD GORLESTON GREAT YARMOUTH NORFOLK NR31 6JT	Date of any change.
Date of Birth:- 12/04/48 Nat:BRITISH OCC:MEDICAL PRACTITIONER f this person has ceased to be director, please state when.	Day Month Year
Show any relevant current and previous directorships.	
Particulars. SIMON DAVID WORSLEY 92 CORTON LONG LANE CORTON LOWESTOFT SUFFOLK NR32 5HB	Day Month Year
Date of Birth:- 14/04/55 Nat:BRITISH Occ:GENERAL MEDICAL PRACTITIONER If this person has ceased to be director, please state when. Show any relevant current and previous directorships.	Day Month Year
Particulars.	Day Month Year Date of any change.
NO MORE DIRECTORS - ADDITIONAL SECRETARIES OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.	
If this person has ceased to be director, please state when. Show any relevant current and previous directorships.	Day Month Year Date of resignation.

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Issued Share Capital (See note 8)	Class (cg Ordinary/ Preference etc.)	Number of shares issued	
Enter details of all shares in issue at the date of this return.	Ordinary	<u> </u>	(ie Number of shares issued multiplied by nominal value per share)
	Totals		<u> L1</u>
List of past and present members (See note 9) (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two returns. The last full members list was at 25/09/95	There were no cl	nanges in the per	Please mark the appropriate box.
	A list of changes A full list of mem		not on paper paper
Elective resolutions (See note 10) (Private companies only)	- 1 (A)		·
If an elective resolution is in force at the date of this return to dispense with annual general meetings, mark this box.			
If an elective resolution is in force at the date of this return to dispense with laying accounts in general meetings, mark this box.			
Certificate I certify that the information given in this return is true to the best of my knowledge and belief.	Signed		Secretary/Director * *(delete as appropriate)
I enclose the fee of £ 15.		•••••••••••••••••••••••••••••••••••••••	
Cheques should be made payable to Companies House.		des (enter number) re that you has s on this page	_
To whom should Companies House direct any enquiries about the information shown in this return?		Postcode	

Telephone Ext