



COMPANIES HOUSE

THE REGISTRAR OF COMPANIES
COMPANIES HOUSE
CROWN WAY
CARDIFF
CF4 3UZ



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
25	09	97

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.

Registered Office (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.

NW
009909
EIS-00

363s

Annual Return

of company number 01523421

Q

company name
NORTH SEA MEDICAL CENTRE LIMITED

company type
PRIVATE COMPANY LIMITED BY SHARES

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

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

Register of members *(See note 5)*

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)*

Particulars of a new secretary **must** be notified on form 288.

PHILIP CHARLES
SMITH
21 BRACON ROAD
BELTON
GREAT YARMOUTH
NORFOLK NR31 9PS

Day Month Year

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Date of any change.

If this person has ceased to be secretary, please state when.

Day Month Year

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Date of resignation.

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 0PE

Day Month Year

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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

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Date of resignation.

Show any relevant current and previous directorships.

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

Directors - continued

Particulars.

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.

Show any relevant current and previous directorships.

Day	Month	Year

Date of any change.

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Day	Month	Year

Date of resignation.

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Particulars.

NEIL MICHAEL
LIVINGSTONE
15 PARK ROAD
GORLESTON
GREAT YARMOUTH
NORFOLK NR31 6EJ

Date of Birth:- 30/04/44
Nat:BRITISH
Occ:MEDICAL PRACTITIONER

If this person has ceased to be director, please state when.

Show any relevant current and previous directorships.

Day	Month	Year

Date of any change.

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Day	Month	Year

Date of resignation.

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Particulars.

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.

Show any relevant current and previous directorships.

Day	Month	Year

Date of any change.

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Day	Month	Year

Date of resignation.

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

Directors - continued

Particulars.

NORMAN KEITH IAN
MCIVER
3 YALLOP AVENUE
GORLESTON
GREAT YARMOUTH
NORFOLK NR31 6HA

Day Month Year

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Date of any change.

Date of Birth:- 20/08/40

Nat:BRITISH

Occ:MEDICAL PRACTITIONER

If this person has ceased to be director, please state when.

Day Month Year

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Date of resignation.

Show any relevant current and previous directorships.

Particulars.

DR
THOMAS
PACE
ACORN FIELDS BACK LANE
LOUND
LOWESTOFT
SUFFOLK NR32 5NE

Day Month Year

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Date of any change.

Date of Birth:- 23/12/46

Nat:BRITISH

Occ:GENERAL MEDICAL PRACTITIONER

If this person has ceased to be director, please state when.

Day Month Year

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Date of resignation.

Show any relevant current and previous directorships.

Particulars.

PHILIP CHARLES
SMITH
21 BRACON ROAD
BELTON
GREAT YARMOUTH
NORFOLK NR31 9PS

Day Month Year

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Date of any change.

Date of Birth:- 02/06/53

Nat:BRITISH

Occ:GENERAL MANAGER MEDICAL CENTRE

If this person has ceased to be director, please state when.

Day Month Year

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Date of resignation.

Show any relevant current and previous directorships.

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

Directors - continued

Particulars.

DAVID GRAHAM
WATSON
54 WARREN ROAD
GORLESTON
GREAT YARMOUTH
NORFOLK NR31 6JT

Day Month Year

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Date of any change.

Date of Birth:- 12/04/48
Nat:BRITISH
Occ:MEDICAL PRACTITIONER

If this person has ceased to be director, please state when.

Day Month Year

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Date of resignation.

Show any relevant current and previous directorships.

Particulars.

SIMON DAVID
WORSLEY
92 CORTON LONG LANE
CORTON
LOWESTOFT
SUFFOLK NR32 5HB

Day Month Year

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Date of any change.

Date of Birth:- 14/04/55
Nat:BRITISH
Occ:GENERAL MEDICAL PRACTITIONER

If this person has ceased to be director, please state when.

Day Month Year

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Date of resignation.

Show any relevant current and previous directorships.

Particulars.

NO MORE DIRECTORS - ADDITIONAL SECRETARIES
OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.

Day Month Year

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Date of any change.

If this person has ceased to be director, please state when.

Day Month Year

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Date of resignation.

Show any relevant current and previous directorships.

Issued Share Capital (See note 8)

01523421

Enter details of all shares in issue at the date of this return.

Class (eg Ordinary/ Preference etc.)	Number of shares issued	Aggregate nominal value <small>(ie Number of shares issued multiplied by nominal value per share)</small>
<u>Ordinary</u>	<u>1</u>	<u>£1</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
Totals	<u>1</u>	<u>£1</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.

Please mark the appropriate box.

There were no changes in the period

☒

The last full members list was at 25/09/95

	on paper	not on paper
A list of changes is enclosed	<input type="checkbox"/>	<input type="checkbox"/>
A full list of members is enclosed	<input type="checkbox"/>	<input type="checkbox"/>

Elective resolutions (See note 10)

(Private companies only)

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.

I enclose the fee of £ 15.

Cheques should be made payable to Companies House.

Signed

Secretary/Director *

*(delete as appropriate)

Date

This return includes _____ continuation sheets.

(enter number)
Please ensure that you have completed all sections on this page.

To whom should Companies House direct any enquiries about the information shown in this return?

Postcode

Telephone

Ext