

Please complete in typescript, or in bold black capitals.

Annual Return

Company Number

02193082

Company Name in full

THE RUTLAND TIMES LIMITED NEW



Date of this return (See note 1) The information in this return is made up to Day Month Year 98 24 06

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.

Day Month Year

HOUSE

STREET

Registered Office (See note 3)

Show here the address at the date of this return.

Any change of registered office must be notified on form 287.

Post town

County / Region

OAKHAM

TIMES

16 B

LEICESTERSHIRE

MILL

Postcode

LE 15 GEA

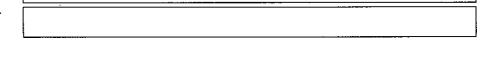
Principal business activities

(See note 4)

Show trade classification code number(s) for the principal activity or activities.

2212

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





COMPANIES HOUSE 21/08/98

Form revised March 1995

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh for companies registered in Scotland

| Register of mem If the register of mem | nbers is not kept a | t the | | | | · · · · · · · · · · · · · · · · · · · | · . | | |
|--|-----------------------|-------------|-----------------------|-----------------------------------|-------------|---------------------------------------|------------|--|--|
| registered office, stat | e nere wnere it is | керт. | | | | | | | |
| | Pos | town | | | | | | | |
| | County / R | egion | | | Postcode | | | | |
| | | | | | | | | | |
| Register of Debe | enture holders | | | | | | | | |
| (See note 6) If there is a register of debenture holders and it is not kept at the registered office, state here where it is kept. | | | | | | | | | |
| | Post | town | | | , | | | | |
| | County / R | egion | | | Postcode | | | | |
| | | | | | | | | | |
| Company type | (See note 7) | | | | | | | | |
| Public limited company | | | | | | | | | |
| Private company limited | d by shares | | | | | | | | |
| Private company limited share capital | d by guarantee witho | out | | | | | | | |
| Private company limited section 30 | d by shares exempt | under | | > Please mark the appropriate box | | | | | |
| Private company limited by guarantee exempt under section 30 | | | | | | | | | |
| Private unlimited compa | any with share capita | al | | | | | | | |
| Private unlimited company without share capital | | | | | | | | | |
| Company Secret | ary (see notes 1-5) | | Datalla af a montant | | | | | | |
| (Please photocopy | V + O. I. | , | Details of a new comp | -] | | tified on | form 288a. | | |
| this area to provide details of joint secretaries). | Name * Style / _ | | MR | <u> </u> *⊦ | Honours etc | | | | |
| · | Forena | | DAVIO | | | | | | |
| * Voluntary details. | Suri | name | LANKESTER | | | | | | |
| Voluntary details. | Previous forename(s) | | | | | | | | |
| | Previous surnar | ne(s) | | | · | | | | |
| Address | | 11 BATH ROL | ಎ | | | | | | |
| Usual residential | | | - | | | √ | | | |
| address must be given. In the case of a | Post | town | STAMFORD | | | | | | |
| corporation, give the registered or principal office address. | County / Re | egion | LINCS | | Postcode | PE 9 | 20,7 | | |
| omoc addices. | Co | untry | ENGLAND | <u> </u> | | | | | |

| Directors (see notes 1-5) Please list directors in alphabetical order. | | | Details of new directors must be notified on form 288a | | | | | | | |
|--|---------------------|-----------------|--|---------|---------------|--------------|------|-------|------|--|
| Name | | * Style / Title | MR | | | | Day | Month | Year | |
| | | * Honours etc | | | Date of birth | | 70 | 09 | 42 | |
| | Forename(s) | ROBERT ANTHONY | | | | | | | | |
| | Surname | FEETHAM | 1 | | | | | | | |
| | Previo | ous forename(s) | | | | | | | | |
| | ous surname(s) | | | | | | | | | |
| Address | | | COOKS FARM | | | | | | | |
| Usual residential | | | ASHTON | | | | | | | |
| address must be given. In the case of a | a Post town | | STAMFO | RD | | | | | | |
| corporation, give the registered or principal office address. | | County / Region | TINCS | · · · · | Postcode | | PE9 | 38A. | | |
| | | Country | ENGLAND | | | BRITISH | | | | |
| | Business occupation | | COMPANY DIRECTOR | | | | | | | |
| | Other directorships | | ASHWELL ASSOCIATES LTO | | | | | | | |
| * Voluntary details. | | | LOCAL PUBLICATIONS LTO | | | | | | | |
| | | | <u> </u> | | 7 | | | | | |
| | Name | * Style / Title | MR | · | | _ | Day | Month | Year | |
| | | * Honours etc | | | D | ate of birth | 14 | 07 | 40 | |
| | | Forename(s) | DAVIO | | | | | | | |
| Surname Previous forename(s) Previous surname(s) Address | | | LANKESTER | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | 11 BATH ROW | | | | | | | |
| Usual residential | | | V | | | | | | | |
| address must be given. In the case of a | | Post town | STAMFORD | | | | | | | |
| corporation, give the registered or principal office address. | | County / Region | LINCS | | | Postcode | PE ' | 7 201 | / | |
| | | Country | ENGLAN | ى ر | | Nationality | BR | HZITI | | |
| | Busine | ss occupation | COMPANY | DIRE | CTOR | | | | | |
| | Other d | lirectorships | ASHWELL ASSOCIATES LTD | | | | | | | |
| | | | LOCAL PUBLICATIONS LTO | | | | | | | |

| Directors (continued) | | | Details of new directors must be notified on form 288a | | | | | | | |
|---|----------|-----------------|--|---------------|-----|-------|----------|--|--|--|
| ` | Name | * Style / Title | | | Day | Month | Year | | | |
| s, | | * Honours etc | | Date of birth | | | , | | | |
| | | Forename(s) | | | | | | | | |
| | | Surname | | | | | | | | |
| | Previo | us forename(s) | | | | | | | | |
| | Previo | ous surname(s) | | | | | | | | |
| Address | | | | | | | | | | |
| Usual residentia | J | | | | | | | | | |
| address must be given. In the case of a | ì | Post town | | | | | | | | |
| corporation, give the registered or principa office address. | | County / Region | | Postcode | | | | | | |
| onice address. | | Country | | Nationality | | | | | | |
| | Busines | s occupation | | | | - | ,, | | | |
| | Other di | rectorships | | | | ,, | | | | |
| * Voluntary details. | | | | | | 778.0 | | | | |
| | | | | , | | | | | | |
| | Name | * Style / Title | | [| Day | Month | Year | | | |
| | | * Honours etc | | Date of birth | | | | | | |
| | | Forename(s) | | | | | | | | |
| Surname | | | | | | | | | | |
| | | us forename(s) | | | | | | | | |
| | | ous surname(s) | | | | | | | | |
| | Address | | | | | | | | | |
| Usual residential | | | | | · | | | | | |
| address must be given. In the case of a corporation, give the | ļ | Post town | | | | | | | | |
| registered or principal office address. | | county / Region | | Postcode | | | | | | |
| | | Country | | Nationality | | | | | | |
| | | s occupation | | | | | | | | |
| | Other di | rectorships | | | | | | | | |
| | | | | | | | | | | |

| Issued share capital (see note 9) Enter details of all the shares in issue at the date of this return. | Class (e.g. Ordinary/Preference) | Number of shares issued | Aggregate Nominal Value (i.e Number of shares issued multiplied by nominal value per share) |
|--|---|--|---|
| | ORDINARY | Soco | £ 2000 |
| | | | |
| | | | |
| | | | |
| | Totals | 5000 | £ 5000 |
| List of past and present members (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two | There were no changes | in the period | |
| returns. (see note 10) | A list of changes is enclo | on pape | er in another format |
| | A full list of members is | enclosed | |
| Elective resolutions (Private companies only) (See note 11) | If at the date of this retu | | rce to dispense with stings, mark this box |
| (See note 11) | If at the date of this return laying acc | rn an election is in for ounts in general mee | • , , , , , , , , , , , , , , , , , , , |
| Certificate | I certify that the informat knowledge and belief. | tion given in this retur | n is true to the best of my |
| Signed | MAD-1 | Da | 18/8/98 |
| [†] Please delete as appropriate. | † a director /secretary | | · · |
| When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House. | This return include | (enter number) | continuation sheets. |
| Please give the name, address, telephone number, and if available, | WHITING | AND PARTNE | rs. |
| a DX number and Exchange, for the person Companies House should | 31 PRIESTGA | ITE PETERBO | ROUGH |
| contact if there is any query. | PEI IJZ | Tel 0(133 | 564082, |
| | DX number | DX exchange | |

| DIRECTORS (continued) | | | Details of new directors must be notified on form 288a | | | | | | |
|---|------------|-----------------|--|---------------------------------------|---------------|--------------|------------|-------------|--|
| 1 | Name | * Style / Title | | | | Day | Month | Year | |
| | | * Honours etc | | D | ate of birth | | | | |
| | | Forename(s) | | | | | | | |
| | | Surname | | | | | | | |
| | Previou | us forename(s) | | | | | | | |
| Previous surname(s) | | | | | | | | | |
| | Address | | | <u></u> | | | | | |
| Usual residentia | n/ | | | | | | | | |
| address must be given. In the case of a | a | Post town | | | | | | | |
| corporation, give the registered or principal office address. | e II Co | ounty / Region | | | Postcode | | | | |
| | | Country | | | | | | | |
| | Business | s occupation | · | | - | , <u>.</u> . | | | |
| | Other dir | ectorships | | | | | | | |
| * Voluntary details | | | | | | | | | |
| | Name | * Style / Title | | 7 | | _ | | | |
| | | * Honours etc | | ָן ח | ate of birth | Day | Month | Year | |
| | | Forename(s) | | | | · | | | |
| Surname Previous forename(s) | | | | | | ···· | | | |
| | | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| | Previo | us surname(s) | | <u> </u> | _ | <u> </u> | | | |
| | Address | [| | - | | | | | |
| Hand mild H | | [| | | - | | | | |
| Usual residential address must be given. In the case of a |) | Post town | | | <u> </u> | | <u>,,,</u> | | |
| corporation, give the registered or principal | , | ounty / Region | | | Postcode | | · | | |
| office address. | | Country | | | Nationality | ··· | | | |
| | Business | occupation | | | | | - | | |
| | Other dire | ectorships | | | | | | | |
| | | | | | | . <u></u> | | | |