



100365/30

363a

Please complete in typescript, or in  
bold black capitals.

## Annual Return

CHFP000

Company number

02670562

Company name in full

THE KNOLL NURSING HOME LIMITED.

### Date of this return

The information in this return is made up to

Day Month Year

0 7 / 0 7 / 1 2 0 0 9

### Date of next return

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

Day Month Year

/ / / / /

### Registered Office

Show here the address at the date of  
this return

CORBIE STEPS

89 HAREHILLS LANE

Any change of  
registered office  
must be notified  
on form 287

Post town

LEEDS.

County/Region

WEST YORKSHIRE

UK Postcode

L S 7 4 H A /

### Principal business activities

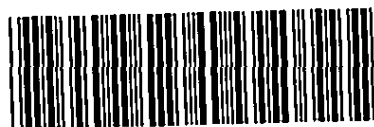
Show trade classification code number(s) for  
the principal activity or activities

8514

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

When you have completed and signed the form please send it to the  
Registrar of Companies at:  
Companies House, Crown Way, Cardiff, CF14 3UZ  
for companies registered in England or Wales or

DX 33050 Cardiff



\*AVKC6BFX\*

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10/07/2009

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COMPANIES HOUSE

by

FRIDAY

**Register of members**

If the register of members is not kept at the registered office, state here where it is kept

AT REGISTERED OFFICE.

Post town

County/Region

UK Postcode

**Register of Debenture holders**

If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state here where it is kept

NOT APPLICABLE

Post town

County/Region

UK Postcode

**Company type**

Public limited company

Private company limited by shares

Private company limited by guarantee without share capital

Private company limited by shares exempt under section 30

Private company limited by guarantee exempt under section 30

Private unlimited company with share capital

Private unlimited company without share capital

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Please tick the appropriate box

**Company Secretary**

Details of a new company secretary must be notified on form 288a

\* Voluntary details  
(Please photocopy this area to provide details of joint secretaries).

Name

\*Style/Title

MR

Forename(s)

WILLIAM JEREMY

Surname

DAVIES

Address ††

THE MANOR HOUSEGREAT SOMERFORD

Post town

CHIPPENHAM

County/Region

WILTSHIRE

UK Postcode

S N I S S E H L

Country

GREAT BRITAIN

†† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

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If a partnership, give the names and addresses of the partners or the name of the partnership and office address

**Directors**

Please list the directors in alphabetical order

Details of new directors must be notified on form 288a

\* Voluntary details

In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name

Name \*Style/Title MR

Day Month Year

Date of birth 2 6 1 0 6 1 9 4 7

Forename(s) WILLIAM JEREMY

Surname DAVIES

Address ☐ ☐ THE MANOR HOUSE  
GREAT SOMERFORD

Post town CHIPPENHAM

County/Region WILTSHIRE

UK Postcode S N 1 5 5 E H L

Country GREAT BRITAIN

Nationality BRITISH

Business occupation CHARTERED SURVEYOR / DIRECTOR.

†† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

**Directors**

Please list the directors in alphabetical order

Details of new directors must be notified on form 288a

\* Voluntary details

In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name

Name \*Style/Title MRS

Day Month Year

Date of birth 2 0 1 0 8 1 9 5 8

Forename(s) PEARL LORRAINE

Surname JACKSON

Address ☐ ☐ WOOLLEY MILL COTTAGE  
WOOLLEY MILL LANE NOTTON

Post town WAKEFIELD

County/Region WEST YORKSHIRE

UK Postcode W F 4 2 N N L L

Country GREAT BRITAIN

Nationality BRITISH

Business occupation DIRECTOR

†† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.

**Schedule A**

**for private or non-traded public companies**

**List of past and present shareholders**

Company number	02 670562
Company name in full	THE KNOW NURSING HOME LIMITED.

- Changes to shareholders' particulars or details of the amount of stock or shares transferred must be completed each year
- You must provide a "full list" of all company shareholders on:
  - The company's first annual return following incorporation
  - Every third annual return after a full list has been provided
- List the company shareholders in alphabetical order or provide an index
- List joint shareholders consecutively

[illegible]

**Issue share capital**

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, or  
total amount of stock)

ORDINARY	1000	£1000
<b>Totals</b>	1000	£1000

**Traded public companies**

A traded public company means a company any of whose shares are shares admitted to trading on a regulated market

Please tick this box if your company was a traded public company at any time during the period of this return

☐
**List of past and present shareholders**

(use attached schedule where appropriate)

Please tick the appropriate box below:

On paper

In another  
format

Private or non-traded public companies are required to provide a "full list" if one was not included with either of the last two returns.

A full list of shareholders for a private or non-traded public company is enclosed. **Please complete Schedule A.**

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Traded public companies are required to provide a list of shareholders who held at least 5% of the issued shares of any share class if a list was not provided with either of the last two returns.

A list of shareholders holding at least 5% of the issued shares of any share class for a traded public company is enclosed. **Please complete Schedule B.**

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A list containing shareholder changes is enclosed

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→ For private or non-traded public companies, **please complete Schedule A**

→ For traded public companies, **please complete Schedule B**

There were no shareholder changes in this period

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**Certificate**

I certify that the information given in this return is true to the best of my knowledge and belief

Signed

*h. d. a. m.*

Date

8/09/2009.

\* Please delete as appropriate

\*(director / secretary)

When you have signed the return, send it with the fee to the Registrar of Companies. Make cheques payable to Companies House.

This return includes

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continuation sheets

(enter number)

You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you give will be visible to searchers of the public record
