Companies House
— for the record —

AR01 (ef)

Annual Return

Received for filing in Electronic Format on the: **08/12/2010**

X67V4PRP

Company Name:	**TUNBRIDGE WELLS COUNSELLING CENTRE**
Company Number:	**02757675**
Date of this return:	**21/10/2010**
SIC codes:	**7499**
Company Type:	**Private company limited by guarantee exempt under section 60**
Situation of Registered Office:	**ST GEORGES CENTRE** **7 CHILSTON ROAD** **TUNBRIDGE WELLS** **KENT** **TN4 9LP**

Officers of the company

Company Secretary 1

Type: **Person**

Full forename(s): **MRS ANNE MARILYN**

Surname: **DAINES**

Former names:

Service Address: **23 GARDEN HOUSE**
CALVERLEY STREET
TUNBRIDGE WELLS
KENT
TN1 2XN

Company Director 1

Type: **Person**

Full forename(s): **MR KEITH DOUGLAS**

Surname: **BALAAM**

Former names:

Service Address: **81 BRITTAINS LANE**
SEVENOAKS
KENT
TN13 2JS

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **19/02/1947** *Nationality:* **BRITISH**

Occupation: **CONSULTANT**

Company Director *2*

Type: **Person**

Full forename(s): **MRS ANNE MARILYN**

Surname: **DAINES**

Former names:

Service Address: **FLAT 23 GARDEN HOUSE CALVERLEY STREET**
TUNBRIDGE WELLS
KENT
TN1 2XN

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **24/01/1953** *Nationality:* **BRITISH**

Occupation: **NONE**

Company Director 3

Type: **Person**

Full forename(s): **MR WILLIAM MORTIMER**

Surname: **MAN**

Former names:

Service Address: **WOODSIDE**
TIDEBROOK
WADHURST SUSSEX
TN5 6PE

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **10/08/1940** *Nationality:* **BRITISH**

Occupation: **RETIRED**

Company Director 4

Type: **Person**

Full forename(s): **MR CHARLES HOWE**

Surname: **MARSHALL**

Former names:

Service Address: **WOODREED FARM**
STONEHURST LANE FIVE ASHES
MAYFIELD
EAST SUSSEX
TN20 6LJ

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **04/12/1949** *Nationality:* **BRITISH**

Occupation: **CHARTERED ACCOUNTANT**

Company Director 5

Type: **Person**

Full forename(s): **DR MICHAEL GRANSTON**

Surname: **RICHARDS**

Former names:

Service Address: **WEST WING**
MALLING DEANERY
LEWES
EAST SUSSEX
BN7 2JA

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **29/03/1937** *Nationality:* **BRITISH**

Occupation: **RETIRED**

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor.