

363a

Please complete in typescript, or in bold black capitals.

		An	nual	Re	tu	rn				
Co	mpany Number		027631	11						
Compa * F 3 6 3 A 0 :	ny Name in full	. A	ADVAN	CED V	ORK	PLACE	ASS	OCIA T	ES LIN	4ITED
Date of this return (so	· · · · · · · · · · · · · · · · · · ·	Day	Month	Year 94	]					
Date of next return (See note 2) f you wish to make your next return o 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	]					
Registered Office (So Show here the address a his return.		16	7 Turn	ers H	i11					
Any change of registered office <b>must</b> be notified on form 287.	Post town County / Region		neshunt	1 178				···.		
	Postcode		erts. N8 9BH					,		
Principal business a See note 4) Show trade classification or the principal activity or	code number(s)	865	59							
f the code number canno give a brief description of										



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 for companies registered in Scotland DX 235 Edinburgh

Register of men If the register of mer registered office, sta	nbers is no	ot kept at the					
		Post town					
	Co	ounty / Region				Postcode	
Register of Deb	enture h	olders					
(See note 6) If there is a registe and it is not kept a state here where it is	at the regi						
		Post town					
	Co	ounty / Region				Postcode	
Company type	(See note 7)	1		٦			
Public limited company	<b>/</b>						
Private company limite	ed by shares	5	х				
Private company limited by guarantee without share capital		ntee without					
Private company limited by shares exempt under section 30		s exempt under	> Please mark the appropriate box				
Private company limited by guarantee exempt under section 30		ntee exempt					
Private unlimited comp	any with sh	nare capital					
Private unlimited comp	any withou	t share capital					
Company Secre	etary (see	notes 1-5)	Details of a n	ew compa	ny secretary	must he no	tified on form 288a.
(Please photocopy this area to provide	Name	* Style / Title	Mrs	ew compa	· · · · · · · · · · · · · · · · · · ·	indst be no	aned on form 200a.
details of joint secretaries).		Forename(s)	Ann M	larie			
		Surname	Maws	-10	58012-2		
* Voluntary details.	Previou	is forename(s)	Maws	<u> </u>			
Previous surname(s)  Address		4 M1	TT 3				
			4 The	Hazels		~~~	
Usual residential			Tewir	1			
address must be given. In the case of a		Post town	Welw	yn			
corporation, give the registered or principal office address.		ounty / Region	Herts	•		Postcode	AL6 0HZ
omos address.		Country	UK				

Directors (continu	red)	Details of new directors	must be notified on for	m 288a	I	
	Name * Style / Title			Day	Month	Year
	* Honours etc		Date of birth			
	Forename(s)					
	Surname					
	Previous forename(s)					
	Previous surname(s)					
,	Address					
Usual residential address must be	Post town					
given. In the case of a corporation, give the registered or principal	County / Region		Postcode			
office address.	Country		Nationality			
1	Business occupation					
(	Other directorships					
* Voluntary details						
Volumenty details						
J	Name * Style / Title			Day	Month	Year
	* Honours etc		Date of birth	. 21 22 . 20		
	Forename(s)					
	Surname					
	Previous forename(s)					
	Previous surname(s)					
ı	Address					
Usual residential						
address must be given. In the case of a	Post town					
corporation, give the registered or principal	County / Region		Postcode			
office address.	Country		Nationality			
ĺ	Business occupation				<del>*************************************</del>	

Other directorships

Number of Class Aggregate (e.g. Ordinary/Preference) shares issued **Nominal Value** Issued share capital (see note 9) (i.e Number of shares issued Enter details of all the shares in issue multiplied by nominal value at the date of this return. per share) 2 2 Ordinary Totals 2 2 List of past and present members There were no changes in the period (Use attached schedule where appropriate) A full list is required if one was not included with either of the last two returns. in another format on paper (see note 10) A list of changes is enclosed A full list of members is enclosed Elective resolutions If at the date of this return an election is in force to dispense with annual general meetings, mark this box (Private companies only) (See note 11) If at the date of this return an election is in force to dispense with laying accounts in general meetings, mark this box I certify that the information given in this return is true to the best of my Certificate knowledge and belief. Signed † Please delete as appropriate. † a director /secretary When you have signed the return send it This return includes continuation sheets. nil with the fee to the Registrar of Companies. Cheques should be made payable to (enter number) Companies House. Please give the name, address, W R M Millen telephone number, and if available, a DX number and Exchange, for 167 Turners Hill, Cheshunt, Herts. the person Companies House should contact if there is any query. Tel 01992 631133 DX number DX exchange

<b>Directors</b> (see no Please list directors in		cal order	Details of new directors must be notified on form 288a					
r roado not arrodora ni	Name	* Style / Title	Mr		Day Month Year			
		* Honours etc		Date of birth	02 04 56			
Forename(s) Surname			William Andre	w				
			Mawson					
	Previo	ous forename(s)						
	Previ	ous surname(s)						
Address			4 The Hazels					
Usual residential			Tewin					
address must be given. In the case of a corporation, give the		Post town	Welwyn					
registered or principal office address.		County / Region	Herts.	Postcode	AL6 0HZ			
		Country	UK	Nationality	British			
	Business occupation		Management C	onsultant				
	Other di	rectorships	, and	****				
* Voluntary details.								
			<u> </u>					
	Name	* Style / Title		_	Day Month Year			
		* Honours etc		Date of birth				
		Forename(s)						
		Surname	i.					
	Previo	us forename(s)						
•	Previo	ous surname(s)						
	Address	•						
Usual residential								
address must be given. In the case of a		Post town						
corporation, give the registered or principal office address.	c	County / Region		Postcode				
		Country		Nationality				
	Busines	s occupation						
•	Other di	rectorships						
		ĺ		***				

Directors (continu	ed)	Details of new directors	must be notified on for	m 288a		
1	Name * Style / Title			Day	Month	Year
	* Honours etc		Date of birth			
•	Forename(s)					(
	Surname					
	Previous forename(s)					
	Previous surname(s)					
,	Address					
,	-tudi 033					
Usual residential address must be	Post town	^				
given. In the case of a corporation, give the registered or principal	County / Region		Postcode			
office address.	Country		Nationality	,		
1	Business occupation	-		<u> </u>		
(	Other directorships				· · ·	1.010
* Voluntary details.			-			
voluntary details.			,			
I	Name * Style / Title			Day	Month	Year
	* Honours etc		Date of birth			
	Forename(s)					
	Surname					
	Previous forename(s)					
	Previous surname(s)					
Address						
			* ***			
Usual residential address must be	Post town					
given. In the case of a corporation, give the	County / Region		Postcode			
registered or principal office address.				L		
	Country		Nationality	<u> </u>		
	Business occupation					

Other directorships