



C O M P A N I E S H O U S E

363_b

Please return to

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

Annual Return

of company number **CN** 2800716 **G**

company name
THE WEYMOUTH CLINIC LIMITED

This form should be completed in black.

Date of this return(See note 1)

The information in this return should be made up to a date not later than

If you are making the return up to an earlier date please show the date here.

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
DA	1 7	0 3	9 4

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DB			
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Registered Office(See note 3)

This is the address registered by Companies House as at 24/02/94

HARBEN HOUSE
HARBEN PARADE
FINCHLEY RD
LONDON NW3 6LH

Use this space to notify a change of registered office address.

RO	
----	--

Post Town _____

County/Region _____

Postcode _____

Principal business activities

(See note 4)

Show trade classification code number for principal activity or activities.

I.C. 435

DATE 15.11.94

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

PA	9	9	9	9
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2800716

Register of members

(See note 5)

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

RM	
Post Town	
County/Region	
Postcode	

Register of Debenture 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.

RD	
Post Town	
County/Region	
Postcode	

Company type (See note 7)

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

T1	<input type="checkbox"/>
T2	<input checked="" type="checkbox"/>
T3	<input type="checkbox"/>
T4	<input type="checkbox"/>
T5	<input type="checkbox"/>
T6	<input type="checkbox"/>
T7	<input type="checkbox"/>

Please mark the appropriate box

Company Secretary (See note 8)

(Please photocopy this area to provide details of joint secretaries)

Name ***Style/Title**

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

* Voluntary details

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

CS	
<u>JOANNE</u>	
<u>PETTY</u>	
AD	<u>39 COLEHERNE COURT</u>
<u>THE LITTLE BOLTONS</u>	
Post Town	<u>LONDON</u>
County/Region	
Postcode	<u>SW5 0DN</u>
Country	

Directors (See note 8)

Please list directors in alphabetical order

Name *Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

Date of birth

Business occupation

Other directorships

Details of new directors must be notified on form 288

CD

KEITH ALAN

ROOKLEDGE

AD 2 WEST AVENUE

PINNER

Post Town MIDDLESEX

County/Region

Postcode HA 5 5BY

Country

Day Month Year

DO 02 08 31

Nationality NA BRITISH

OC BIO CHEMIST

OD SEE ATTACHED LIST.

Name

*Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

Usual residential address must be given. In the case of a corporation, give the registered or principal office address.

Date of birth

Business occupation

Other directorships

CD

AD

Post Town

County/Region

Postcode

Country

Day Month Year

DO

Nationality NA

OC

OD

* Voluntary details

If you have more than two directors please use the continuation sheet provided

ued share capital

(note 9)

er details of all the shares in
e at the date of this return.

Class	Number	Aggregate Nominal Value
<u>Ordinary</u>	<u>2</u>	<u>2</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
Totals	<u>2</u>	<u>2</u>

t of past and present

members (See note 10)

attached schedule where appropriate)

ull list is required.

Please mark the
appropriate box

A full list of members is enclosed

on paper

☒not on
paper☐**ective resolutions**

(note 11)

(note companies only)

If an election is in force at the date of this return to dispense
with annual general meetings, mark this box.

☐

If an election is in force at the date of this return to dispense
with laying accounts in general meetings, mark this box.

☐**rtificate**

certify that the information
en in this return is true to the
t of my knowledge and belief.

nclose the fee of £32.

Signed

Secretary/Director
(* delete as appropriate)

Date

This return includes A continuation sheets.
(enter number)

whom should Companies
use direct any enquiries about
information shown in this
urn?

Wardour Registrars Ltd.,
Harben House,
Harben Parade,
Finchley Road,
London, NW3 6LH.

Postcode

Telephone

Extension

heck List Have you included - your principal business activity code?

- dates of birth of all directors?

- a signature of either a director or secretary?

- a members list (if required)?



Printed on

LIST OF PAST AND PRESENT MEMBERS (continued)

SCHEDULE TO FORM 363[illegible]