



Companies House

— for the record —

AR01 (ef)

Annual Return



XFJKAWJ4

Received for filing in Electronic Format on the: **09/08/2011**

Company Name: **SHROPSHIRE EDUCATION AND CONFERENCE CENTRE**

Company Number: **03795755**

Date of this return: **24/06/2011**

SIC codes: **8042**

Company Type: **Private company limited by guarantee exempt under section 60**

Situation of Registered Office: **SHROPSHIRE EDUCATION AND
CONFERENCE CENTRE ROYAL
SHREWSBURY HOSPITAL MYTTON OAK
ROAD SHREWSBURY
SY3 8XF**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **LT COI MICHAEL BARNARD**

Surname: **CARVER**

Former names:

Service Address: **6 WINTERTON WAY
BICTON HEATH
SHREWSBURY
SALOP
SY3 5PA**

Company Director **1**

Type: **Person**

Full forename(s): **EDWARD THOMAS BISSELL**

Surname: **BUTCHER**

Former names:

Service Address: **16 KENNEDY ROAD
SHREWSBURY
SALOP
SY3 7AB**

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

Date of Birth: **23/12/1938** *Nationality:* **BRITISH**

Occupation: **COMPANY DIRECTOR**

Company Director 2

Type: **Person**
Full forename(s): **LT COI MICHAEL BARNARD**

Surname: **CARVER**

Former names:

Service Address: **6 WINTERTON WAY
BICTON HEATH
SHREWSBURY
SALOP
SY3 5PA**

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

Date of Birth: **26/11/1942** *Nationality:* **BRITISH**
Occupation: **RETD**

Company Director **3**

Type: **Person**

Full forename(s): **MRS JULIA JOSEPHINE LINDA**

Surname: **CLARKE**

Former names: **BUCKLEY DYAS**

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: **08/07/1956**

Nationality: **BRITISH**

Occupation: **HOSPITAL DIRECTOR**

Company Director 4

Type: **Person**
Full forename(s): **DOCTOR ROBERT ASHLEY**

Surname: **FRASER**

Former names:

Service Address: **KINDER
10 PORT HILL ROAD
SHREWSBURY
SHROPSHIRE
SY3 8SE**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **07/01/1948** *Nationality:* **BRITISH**

Occupation: **DOCTOR OF MEDICINE**

Company Director **5**

Type: **Person**

Full forename(s): **MR GLENVILLE RICHARD**

Surname: **LAWES**

Former names:

Service Address: **10 COLLEGE HILL
SHREWSBURY
SHROPSHIRE
SY1 1LZ**

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

Date of Birth: **28/05/1945** *Nationality:* **BRITISH**

Occupation: **CONSULTANT**

Company Director **6**

Type: **Person**
Full forename(s): **DR NIGEL TIMOTHY**

Surname: **O'CONNOR**

Former names:

Service Address recorded as Company's registered office

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

Date of Birth: **17/09/1953** *Nationality:* **BRITISH**

Occupation: **DOCTOR**

Company Director 7

Type: **Person**

Full forename(s): **MR TIMOTHY MAURICE**

Surname: **PARSONS**

Former names:

Service Address: **CARDESTON MANOR
CARDESTON, FORD
SHREWSBURY
SALOP
SY5 9NJ**

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

Date of Birth: **15/12/1955** *Nationality:* **BRITISH**

Occupation: **DENTAL SURGEON**

Company Director 8

Type: **Person**
Full forename(s): **PETER JOHN**

Surname: **STEWART**

Former names:

Service Address: **14 ST JOHNS HILL
SHREWSBURY
SHROPSHIRE
SY1 1JJ**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **17/09/1944** *Nationality:* **BRITISH**
Occupation: **SOLICITOR**

Authorisation

Authenticated

This form was authorised by one of the following:

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