



Companies House

— for the record —

Company Name

**CORNWALL COMMUNITY
DEVELOPMENT LIMITED**

363s Annual Return

LN/TSB/15

001626

Company Type

**Private Company Limited By
Guarantee Without Share Capital**

Company Number

4144745

Information extracted from
Companies House records on
4th January 2002

- > Please check the details printed in blue on this statement.
- > If any details are wrong, strike them through and write the correct details in the "Amended details" column.
- > Please use black pen and write in capitals.



A47
COMPANIES HOUSE

0718
26/01/02

Section 1: Company details

Ref: 4144745/13/37

	Current details	Amended details																		
> Registered Office Address <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	9a River Street Truro Cornwall TR1 2SQ	Address _____ _____ _____ UK Postcode _ _ _ _ _																		
> Register of Members <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Address where the Register is held At Registered Office	Address _____ _____ _____ UK Postcode _ _ _ _ _																		
> Register of Debenture Holders <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Not Applicable	Address _____ _____ _____ UK Postcode _ _ _ _ _																		
> Principal Business Activities <i>Please enter principal activity code(s) in "Amended details" column. See notes for guidance for list of activity codes. Please use the most appropriate code in the list, or write a short description of your company's activities.</i>	<i>None held, please enter SIC code or description in the amended details column.</i>	<table border="1"> <thead> <tr> <th>SIC CODE</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>CHARITABLE COMPANY - OUR OBJECTS</td> </tr> <tr> <td>_____</td> <td>ARE TO STRENGTHEN AND SUPPORT THE</td> </tr> <tr> <td>_____</td> <td>SOCIAL AND COMMUNITY DEVELOPMENT</td> </tr> <tr> <td>_____</td> <td>IN CORNWALL OF RURAL AREAS AND</td> </tr> <tr> <td>_____</td> <td>ALL RELATED VOLUNTARY ACTIVITIES,</td> </tr> <tr> <td>_____</td> <td>REPRESENTING THE NEEDS AND ASPIRATIONS</td> </tr> <tr> <td>_____</td> <td>OF THOSE LIVING AND WORKING IN</td> </tr> <tr> <td>_____</td> <td>RURAL CORNWALL.</td> </tr> </tbody> </table>	SIC CODE	Description	_____	CHARITABLE COMPANY - OUR OBJECTS	_____	ARE TO STRENGTHEN AND SUPPORT THE	_____	SOCIAL AND COMMUNITY DEVELOPMENT	_____	IN CORNWALL OF RURAL AREAS AND	_____	ALL RELATED VOLUNTARY ACTIVITIES,	_____	REPRESENTING THE NEEDS AND ASPIRATIONS	_____	OF THOSE LIVING AND WORKING IN	_____	RURAL CORNWALL.
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	Current details	Amended details
> Company Secretary <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Company Secretary must be notified on form 288.</i>	Name Paul COYNE Address 76 Saint Clements Close Truro Cornwall TR1 1PB	Name Address UK Postcode _ _ _ _ Date of change _ _ / _ _ / _ _ Date Paul COYNE ceased to be secretary (if applicable) _ _ / _ _ / _ _
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name Edna Grace ANGOVE Address Roseview Little Polgooth St. Austell Cornwall PL26 7DD Date of birth 15/06/1935 Nationality British Occupation Retired	Name Address UK Postcode _ _ _ _ Date of birth _ _ / _ _ / _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ Date Edna Grace ANGOVE ceased to be director (if applicable) _ _ / _ _ / _ _
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name Cllr Bert Martin Montague BISCOE Address 3 Lower Rosewin Row Truro Cornwall TR1 1EN Date of birth 23/12/1952 Nationality British Occupation Administrator And Artist	Name Address UK Postcode _ _ _ _ Date of birth _ _ / _ _ / _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ Date Cllr Bert Martin Montague BISCOE ceased to be director (if applicable) _ _ / _ _ / _ _

	Current details	Amended details
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. Particulars of a new Director must be notified on form 288.	Name Cllr Leonard Dudley BROKENSHIRE Address 35 Green Lane Penryn Falmouth Cornwall TR10 8QN Date of birth 25/12/1933 Nationality British Occupation Retired	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Cllr Leonard Dudley BROKENSHIRE ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. Particulars of a new Director must be notified on form 288.	Name Alexander BRUCE Address Wild Air Hain Walk St. Ives Cornwall TR26 2AF Date of birth 05/09/1926 Nationality British Occupation Retired	Name ALEXANDER BRYCE Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Alexander BRUCE ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. Particulars of a new Director must be notified on form 288.	Name Cllr Richard John COOPER Address 7 Alexandra Terrace Short Cross Road, Mount Hawke Truro Cornwall TR4 8DU Date of birth 15/08/1953 Nationality British Occupation Manager Retail Outlet	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Cllr Richard John COOPER ceased to be director (if applicable) _ _ / _ _ / _ _ _ _

	Current details	Amended details
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Name Richard John EVANS Address 4 Clifton Gardens Richmond Hill Truro Cornwall TR1 3HL Date of birth 12/08/1945 Nationality British Occupation Marquess	Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation <u>PEROSE MARQUES</u> Date of change _ _ / _ _ / _ _ _ _ Date Richard John EVANS ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
<i>Particulars of a new Director must be notified on form 288.</i>		
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Name David William FRYER Address Honeyway Tregungeeves Lane Polgooth St. Austell Cornwall PL26 7AX Date of birth 24/07/1937 Nationality British Occupation Education Consultant	Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date David William FRYER ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
<i>Particulars of a new Director must be notified on form 288.</i>		
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Name Cllr Pamela Joan GAMON Address 6 Whiterock Terrace Wadebridge Cornwall PL27 7EG Date of birth 23/10/1922 Nationality British Occupation Ned Councillor <u>COUNCIL</u>	Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation <u>NCDC COUNCILLOR</u> Date of change _ _ / _ _ / _ _ _ _ Date Cllr Pamela Joan GAMON ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
<i>Particulars of a new Director must be notified on form 288.</i>		

	Current details	Amended details
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name June HACKETT Address Jubar 6 Stenalees Hill St Austell Cornwall PL26 8TB Date of birth 06/06/1938 Nationality British Occupation None	Name _____ Address _____ _____ _____ UK Postcode _____ Date of birth ____ / ____ / ____ Nationality _____ Occupation _____ Date of change ____ / ____ / ____ Date June HACKETT ceased to be director (if applicable) ____ / ____ / ____
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name Cllr Brian John HIGMAN Address Ere-We-Be Trebilock Farm Roche St. Austell Cornwall PL26 8LP Date of birth 11/05/1947 Nationality British Occupation Farmer	Name _____ Address _____ _____ _____ UK Postcode PL26 8LF Date of birth ____ / ____ / ____ Nationality _____ Occupation _____ Date of change ____ / ____ / ____ Date Cllr Brian John HIGMAN ceased to be director (if applicable) ____ / ____ / ____
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288.</i>	Name George Joseph HOCKING Address Chapel House Duloe Liskeard Cornwall PL14 4PW Date of birth 07/06/1928 Nationality British Occupation County Councillor	Name Cllr George Joseph Hocking Address _____ _____ _____ UK Postcode _____ Date of birth ____ / ____ / ____ Nationality _____ Occupation _____ Date of change ____ / ____ / ____ Date George Joseph HOCKING ceased to be director (if applicable) ____ / ____ / ____

	Current details	Amended details
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. Particulars of a new Director must be notified on form 288.	Name Lady Mary Christina HOLBOROW JP Address Ladock House Ladock Truro Cornwall TR2 4PL Date of birth 19/09/1936 Nationality British Occupation Retired	Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Lady Mary Christina HOLBOROW JP ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. Particulars of a new Director must be notified on form 288.	Name Annabel JOHN Address Bosbyghan 32 Trewithen Parc St Newlyn East Newquay Cornwall TR8 5NG Date of birth 05/01/1934 Nationality British Occupation House	Name Address BOSBYGHAM 32 TREWITHEN PARC UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Annabel JOHN ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. Particulars of a new Director must be notified on form 288.	Name Richard LINGHAM Address John Keay House St. Austell Cornwall PL25 4NQ Date of birth 07/04/1940 Nationality British Occupation Chairman-Cornwall Health Auth	Name Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Richard LINGHAM ceased to be director (if applicable) _ _ / _ _ / _ _ _ _

	Current details	Amended details
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. Particulars of a new Director must be notified on form 288.	Name Graham LOVERING Address Menolas Beach Road Porthpean St. Austell Cornwall PL26 6AU Date of birth 30/09/1937 Nationality British Occupation Retired	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Graham LOVERING ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. Particulars of a new Director must be notified on form 288.	Name Pamela Angela LYNE Address Chywartha Kestle Manaccan Helston Cornwall TR12 6HU Date of birth 07/12/1934 Nationality British Occupation Farmer	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Pamela Angela LYNE ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. Particulars of a new Director must be notified on form 288.	Name Meinwen MARSH Address Tehidy House Rch Trelliske Truro Cornwall TR1 3LJ Date of birth 23/09/1928 Nationality British Occupation Chief Exe Cwll Friends Mobilis	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation CHIEF EXE CWLL FRIENDS MOBILIS Date of change _ _ / _ _ / _ _ _ _ Date Meinwen MARSH ceased to be director (if applicable) _ _ / _ _ / _ _ _ _

	Current details	Amended details
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. <i>Particulars of a new Director must be notified on form 288.</i>	Name Peter William MITCHELL Address 10 Albert Place Truro Cornwall TR1 2DL Date of birth 11/05/1939 Nationality British Occupation Retired	Name _____ Address _____ _____ _____ UK Postcode _____ Date of birth ____ / ____ / ____ Nationality _____ Occupation _____ Date of change ____ / ____ / ____ Date Peter William MITCHELL ceased to be director (if applicable) ____ / ____ / ____
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. <i>Particulars of a new Director must be notified on form 288.</i>	Name Councillor Michael John PAYNE Address 9 Charles Street Newlyn Penzance Cornwall TR18 5QB Date of birth 08/02/1948 Nationality British Occupation District Councillor	Name _____ Address _____ _____ _____ UK Postcode _____ Date of birth ____ / ____ / ____ Nationality _____ Occupation _____ Date of change ____ / ____ / ____ Date Councillor Michael John PAYNE ceased to be director (if applicable) ____ / ____ / ____
> Director If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column. <i>Particulars of a new Director must be notified on form 288.</i>	Name Eleanor Mollie PEACOCK Address The Barn St. Agnes Isles Of Scilly TR22 0PL Date of birth 14/01/1937 Nationality British Occupation Retired	Name CLLR ELEANOR MOLLIE PEACOCK Address _____ _____ _____ UK Postcode _____ Date of birth ____ / ____ / ____ Nationality _____ Occupation _____ Date of change ____ / ____ / ____ Date Eleanor Mollie PEACOCK ceased to be director (if applicable) ____ / ____ / ____

	Current details	Amended details
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Name Philip James RANDALL Address Timbers Snappers Lane, Coombe St. Austell Cornwall PL26 7LH Date of birth 16/05/1951 Nationality British Occupation Local Government	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Philip James RANDALL ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
<i>Particulars of a new Director must be notified on form 288.</i>		
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Name Isabelle Cynthia WATMORE NFF DIP Address Briarbank 11 Clements Road Penzance Cornwall TR18 4LL Date of birth 01/02/1932 Nationality British Occupation Retired	Name _____ Address _____ _____ _____ UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Isabelle Cynthia WATMORE NFF DIP ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
<i>Particulars of a new Director must be notified on form 288.</i>		



Companies House

— for the record —

363s Annual Return Declaration

- > When you have checked all the sections of this form, please complete this page and sign the declaration below.
- > If you want to change the made up date of this annual return, please complete 2 below.

1. Declaration

- ☐ I confirm that the details in this annual return are correct as at the made-up-date (shown at 2 below). I enclose the filing fee of £15.

Signature

Paul Hays
(Director/Secretary)

Date

23 / 01 / 2002

This date must not be earlier than the return date at 2 below

What to do now

Complete this page then send the whole of the Annual Return and the declaration to the address shown at 4 below.

2. Date of this return

- ☐ This AR is made up to 19/1/2002 If you are making this return up to an earlier date, please give the date here

__ / __ / __

Note: The form must be delivered to CH within 28 days of this date

3. Date of next return

- ☐ If you wish to change your next return to a date earlier than **19th January 2003** please give the new date here:

__ / __ / __

4. Where to send this form

- ☐ Please return this form to:
Registrar of Companies
Companies House
Crown Way
Cardiff CF14 3UZ
- OR
- For members of the Hays Document
Exchange service
DX 33050 Cardiff

Have you enclosed the filing fee with the company number written on the reverse of the cheque?

Cheque ☐ Postal Order ☐ Cheque / Postal Order
Number _____

(Please complete as appropriate)

Contact Address

Please give the name and address of the person who should be contacted if there are any queries about this form.

Contact Name

PAUL COYNE

Telephone number inc code

01872 273952

Address

9A RIVER STREET
TRURO
CORNWALL

DX number if applicable

DX exchange

Postcode

TR1 2SQ