



Annual Return

Company Name: **ABRIDGE GOLF CLUB (HOLDINGS) LIMITED**

Company Number: **04250717**



Received for filing in Electronic Format on the: **05/07/2016**

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Company Name: **ABRIDGE GOLF CLUB (HOLDINGS) LIMITED**

Company Number: **04250717**

Date of this return: **26/06/2016**

Sic Codes: **93120**

Company Type: **Private company limited by guarantee**

Situation of **EPPING LANE STAPLEFORD TAWNEY ESSEX**

Registered Office: **RM4 1ST**

Officers of the company

Company Secretary 1

Type: **Person**
Full Forename(s): **MR COLIN**
Surname: **MYERS**
Service Address: **EPPING LANE ESSEX STAPLEFORD TAWNEY**
RM4 1ST

Company Director 1

Type: **Person**
Full Forename(s): **LESLEY SUSAN**
Surname: **ALLSUCH**
Service Address: **recorded as Company's registered office**

Country/State **ENGLAND**
Usually Resident:
Date of Birth: ****/08/1948** Nationality: **BRITISH**
Occupation: **HOUSEWIFE**

Company Director 2

Type: **Person**
Full Forename(s): **MR ALLAN**
Surname: **BRETT**
Service Address: **EPPING LANE ESSEX STAPLEFORD TAWNEY**
RM4 1ST

Country/State **ENGLAND**
Usually Resident:
Date of Birth: ****/08/1946** Nationality: **BRITISH**
Occupation: **INSURANCE**
BROKER

Company Director 3

Type: **Person**
Full Forename(s): **MR LAURENCE**
Surname: **GREEN**
Service Address: **EPPING LANE ESSEX STAPLEFORD TAWNEY
RM4 1ST**

Country/State **ENGLAND**

Usually Resident:

Date of Birth: ****/11/1953**

Nationality: **BRITISH**

Occupation: **DIRECTOR**

Company Director 4

Type: **Person**
Full Forename(s): **LEWIS**
Surname: **JACOBS**
Service Address: **recorded as Company's registered office**

Country/State **ENGLAND**

Usually Resident:

Date of Birth: ****/03/1955**

Nationality: **BRITISH**

Occupation: **OPTICIAN**

Company Director 5

Type: **Person**
Full Forename(s): **MR SIMON PHILIP**
Surname: **LEVY**
Service Address: **recorded as Company's registered office**

Country/State **UNITED KINGDOM**

Usually Resident:

Date of Birth: ****/04/1957**

Nationality: **BRITISH**

Occupation: **SURVEYOR**

Company Director 6

Type: **Person**
Full Forename(s): **MR COLIN**
Surname: **MYERS**
Service Address: **EPHING LANE ESSEX STAPLEFORD TAWNEY
RM4 1ST**

Country/State **ENGLAND**

Usually Resident:

Date of Birth: ****/10/1950**

Nationality: **BRITISH**

Occupation: **ACCOUNTANT**

Company Director 7

Type: **Person**
Full Forename(s): **MR AUSTIN AVERY**
Surname: **POSNER**
Service Address: **recorded as Company's registered office**

Country/State **UNITED KINGDOM**

Usually Resident:

Date of Birth: ****/10/1950**

Nationality: **BRITISH**

Occupation: **DIRECTOR**

Company Director 8

Type: **Person**
Full Forename(s): **MR GARY SIMON**
Surname: **SPECTERMAN**
Service Address: **recorded as Company's registered office**

Country/State **ENGLAND**

Usually Resident:

Date of Birth: ****/03/1954**

Nationality: **BRITISH**

Occupation: **ACCOUNTANT**

Company Director 9

Type: **Person**
Full Forename(s): **DAVID SYDNEY**
Surname: **SUMMERS**
Service Address: **recorded as Company's registered office**

Country/State **UNITED KINGDOM**

Usually Resident:

Date of Birth: ****/09/1953**

Nationality: **BRITISH**

Occupation: **RETIRED**

Company Director 10

Type: **Person**
Full Forename(s): **MARCUS**
Surname: **WAGNER**
Service Address: **recorded as Company's registered office**

Country/State **UNITED KINGDOM**

Usually Resident:

Date of Birth: ****/10/1958**

Nationality: **BRITISH**

Occupation: **DIRECTOR**

Authorisation

Authenticated

This form was authorised by one of the following:

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

