



Companies House

AR01 (ef)

Annual Return



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Company Name: **Abbotsley Veterinary Practice Limited**

Company Number: **04525695**

Date of this return: **04/09/2015**

SIC codes: **75000**

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

Situation of Registered Office: **107 HIGH STREET
WEST MALLING
KENT
UNITED KINGDOM
ME19 6NA**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **MRS KIM**

Surname: **FOXELL**

Former names:

Service Address: **3 CLARE LANE EAST MALLING
WEST MALLING
KENT
ENGLAND
ME19 6BN**

Company Director **1**

Type: **Person**

Full forename(s): **PETER**

Surname: **FOXELL**

Former names:

Service Address: **3 CLARE LANE EAST MALLING
WEST MALLING
KENT
ENGLAND
ME19 6BN**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **27/05/1961**

Nationality: **BRITISH**

Occupation: **DIRECTOR**

Company Director **2**

Type: **Person**
Full forename(s): **MRS KIM**

Surname: **FOXELL**

Former names:

Service Address: **3 CLARE LANE EAST MALLING**
 WEST MALLING
 KENT
 ENGLAND
 ME19 6BN

Country/State Usually Resident: **ENGLAND**

Date of Birth: **24/07/1962** *Nationality:* **BRITISH**
Occupation: **SECRETARY**

Statement of Capital (Share Capital)

Class of shares	ORDINARY	<i>Number allotted</i>	2
		<i>Aggregate nominal value</i>	2
<i>Currency</i>	GBP	<i>Amount paid per share</i>	1
		<i>Amount unpaid per share</i>	0

Prescribed particulars

FULL RIGHTS TO VOTING DIVIDENDS AND DISTRIBUTION

Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	2
		<i>Total aggregate nominal value</i>	2

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 04/09/2015 or that had ceased to be shareholders since the made up date of the previous Annual Return

A full list of shareholders for the company are shown below

Shareholding 1 : **1 ORDINARY shares held as at the date of this return**
Name: **KIM FOXELL**

Shareholding 2 : **1 ORDINARY shares held as at the date of this return**
Name: **PETER FOXELL**

Authorisation

Authenticated

This form was authorised by one of the following:

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