

# RP04

## Second filing of a document previously delivered



\*AA3YJEYH\*

A15	06/05/2021	#24
COMPANIES HOUSE		
*A91GJ5CW*		
A07	23/03/2020	#261
COMPANIES HOUSE		
*A9W6ZKHT*		
A04	09/03/2020	#189
COMPANIES HOUSE		

### ✓ What this form is for

You can only use this form to file a second filing of a document delivered under the Companies Act 2006 on or after 1 October 2009 that held inaccuracies.

A second filing of a document must only be filed where it is providing corrected information that has been properly delivered but inaccuracies still appear on the register.

### ✗ What this form is NOT for

You cannot use this form to second filing of a document under the Companies Act 1985 or the Companies (Northern Ireland) Order 1986 regardless of whether it was properly delivered.

A second filing of a document cannot be filed where it is correcting information that was originally not properly delivered. Form RP01 must be used in these circumstances.

## 1 Company details

Company number 0 4 6 8 8 7 4 0

Company name in full BRIGEND ANAESTHETISTS LIMITED

### → Filing in this form

Please complete in typescript or in bold black capitals.

All fields are mandatory unless specified or indicated by \*

## 2 Applicable documents

This form **only** applies to the following forms:

- AP01 Appointment of director
- AP02 Appointment of corporate director
- AP03 Appointment of secretary
- AP04 Appointment of corporate secretary
- CH01 Change of director's details
- CH02 Change of corporate director's details
- CH03 Change of secretary's details
- CH04 Change of corporate secretary's details
- TM01 Termination of appointment of director
- TM02 Termination of appointment of secretary
- SH01 Return of allotment of shares
- AR01 Annual Return
- CS01 Confirmation statement (Parts 1-4 only)
- PSC01 Notice of individual person with significant control (PSC)
- PSC02 Notice of relevant legal entity (RLE) with significant control
- PSC03 Notice of other registrable person (ORP) with significant control
- PSC04 Change of details of individual person with significant control (PSC)
- PSC05 Change of details of relevant legal entity (RLE) with significant control
- PSC06 Change of details of other registrable person (ORP) with significant control
- PSC07 Notice of ceasing to be a person with significant control (PSC), relevant legal entity (RLE), or other registrable person (ORP)
- PSC08 Notification of PSC statements
- PSC09 Update to PSC statements

RP04

Second filing of a document previously delivered

### 3 Description of the original document

Document type ①

ANNUAL RETURN (AR01)

Date of registration of the original document

<sup>d</sup>0<sup>d</sup>6    <sup>m</sup>0<sup>m</sup>3    <sup>y</sup>2<sup>y</sup>0<sup>y</sup>1<sup>y</sup>2

#### ① Description of the original document

Please enter the document type (e.g. a Return of allotment of shares—SH01) and any distinguishing information if more than one document of that type was filed on the same day.

### 4 Section 243 or 790ZF Exemption ②

If you are applying for, or have been granted, exemption under section 243 or 790ZF of the Companies Act 2006 and the document(s) you are updating contain(s) your usual residential address, please post this form along with the updated document(s) to the address below:

The Registrar of Companies, PO BOX 4082, Cardiff, CF14 3WE.

② If you are currently in the process of applying for or have been granted a Section 243 or 790ZF exemption, you may wish to check that you have not entered your usual residential address as the service address in the accompanying form (e.g. AP01 or CH01).

RP04

Second filing of a document previously delivered



### Presenter information

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

Contact name ELB/R508-8

Company name BERRY SMITH LLP

Address HAYWOOD HOUSE, DUMFRIES

PLACE

Post town CARDIFF

County/Region

Postcode C F 1 0 3 G A

Country

DX 33097 CARDIFF 1

Telephone 029 2034 5511



### Checklist

**We may return forms completed incorrectly or with information missing.**

**Please make sure you have remembered the following:**

- ☐ The company name and number match the information held on the public Register.
- ☐ You can only use this form to file a second filing of a document delivered to the Registrar of Companies under the Companies Act 2006 on or after 1 October 2009 that held inaccuracies.
- ☐ If you are updating a document where you have previously paid a fee, do not send a fee along with this form.
- ☐ You have enclosed the second filed document(s).
- ☐ If the company to which this document relates has signed up to the PROOF (PROtected Online Filing) scheme, you must also deliver with this form, and the second filed document(s), a PR03 form 'Consent for paper filing.'



### Important information

**Please note that all information on this form will appear on the public record.**



### Where to send

**You may return this form to any Companies House address, however for expediency we advise you to return it to the appropriate address below:**

#### For companies registered in England and Wales:

The Registrar of Companies, Companies House,  
Crown Way, Cardiff, Wales, CF14 3UZ.  
DX 33050 Cardiff.

#### For companies registered in Scotland:

The Registrar of Companies, Companies House,  
Fourth floor, Edinburgh Quay 2,  
139 Fountainbridge, Edinburgh, Scotland, EH3 9FF.  
DX ED235 Edinburgh 1  
or LP - 4 Edinburgh 2 (Legal Post).

#### For companies registered in Northern Ireland:

The Registrar of Companies, Companies House,  
Second Floor, The Linenhall, 32-38 Linenhall Street,  
Belfast, Northern Ireland, BT2 8BG.  
DX 481 N.R. Belfast 1.

#### Section 243 or 790ZF exemption

If you are applying for or have been granted a section 243 or 790ZF exemption, please post this whole form to the different postal address below:

The Registrar of Companies, PO Box 4082,  
Cardiff, CF14 3WE.



### Further information

For further information, please see the guidance notes on the website at [www.gov.uk/companieshouse](http://www.gov.uk/companieshouse) or email [enquiries@companieshouse.gov.uk](mailto:enquiries@companieshouse.gov.uk)

**This form is available in an alternative format. Please visit the forms page on the website at [www.gov.uk/companieshouse](http://www.gov.uk/companieshouse)**

# AR01 2015

## Annual Return



Go online to file this information  
[www.gov.uk/companieshouse](http://www.gov.uk/companieshouse)

A fee is payable with this form  
Please see 'How to pay' on the  
last page.

☒ **What this form is for**  
You may use this form to confirm  
that the company information is  
correct as at the date of this return.  
You must file an Annual Return at  
least once every year.

☒ **What this form is NOT for**  
You cannot use this form to give  
notice of changes to the company  
officers, registered office address,  
company type or information  
relating to the company records.

For further information, please  
refer to our guidance at  
[www.gov.uk/companieshouse](http://www.gov.uk/companieshouse)

### Part 1 Company details

The section must be completed by all companies.

#### → Filling in this form

Please complete in typescript or in  
bold black capitals.

All fields are mandatory unless  
specified or indicated by \*

#### A1 Company details

Company number 0 4 6 8 8 7 4 0

Company name in full  
① BRIDGEND ANAESTHETISTS LIMITED

#### ① Company name change

If your company has recently  
changed its name, please provide  
the company name as at the date of  
this return.

#### A2 Return date

Please give the annual return made up date. The return date must not be a future  
date. The annual return must be delivered within 28 days of the date given below.

Date of this return ② d 0 6 m 0 3 y 2 0 1 2

#### ② Date of this return

Your company's return date  
is usually the anniversary of  
incorporation or the anniversary  
of the last annual return filed at  
Companies House. You may choose  
an earlier return date but it must not  
be a later date.

#### A3 Principal business activity

Please show the trade classification code number(s) for the principal  
activity or activities. ③

Classification code 1 8 6 2 1 0

Classification code 2

Classification code 3

Classification code 4

If you cannot determine a code, please give a brief description of your  
business activity below:

Principal activity  
description

#### ③ Principal business activity

You must provide a trade  
classification code (SIC code 2007)  
or a description of your company's  
main business in this section.

A full list of the trade classification  
codes are available on our website:  
[www.gov.uk/companieshouse](http://www.gov.uk/companieshouse)

# AR01 2015

## Annual Return

**A4**

### Company type<sup>①</sup>

Please confirm your company type by ticking the appropriate box below (only one box must be ticked):

- ☐ Public limited company
- ☒ Private company limited by shares
- ☐ Private company limited by guarantee
- ☐ Private company limited by shares exempt under section 60
- ☐ Private company limited by guarantee exempt under section 60
- ☐ Private unlimited company with share capital
- ☐ Private unlimited company without share capital

#### ① Company type

If you are unsure of your company type, please check your latest certificate of incorporation or our website:  
[www.gov.uk/companieshouse](http://www.gov.uk/companieshouse)

**A5**

### Registered office address<sup>②</sup>

Building name/number	BERRY SMITH CORPORATE
Street	HAYWOOD HOUSE DUMFRIES PLACE
Post town	CARDIFF
County/Region	
Postcode	C F 1 0 3 G A

#### ② Change of registered office

This must agree with the address that is held on the Companies House record at the date of this return.

If the registered office address has changed, you should complete form **AD01** and submit it together with this annual return.

**A6**

### Single alternative inspection location (SAIL) of the company records (if applicable) <sup>③</sup>

Building name/number	
Street	
Post town	
County/Region	
Postcode	

#### ③ SAIL address

This must agree with the address that is held on the Companies House record at the date of this return.

If the address has changed, you should complete form **AD02** and submit it together with this annual return.

**A7**

### Location of company records<sup>④</sup>

Please tick the appropriate box to indicate which records are kept at the SAIL address in **Section A6**:

- ☐ Register of people with significant control.
- ☐ Register of members.
- ☐ Register of directors.
- ☐ Directors' service contracts.
- ☐ Directors' indemnities.
- ☐ Register of secretaries.
- ☐ Records of resolutions etc.
- ☐ Contracts relating to purchase of own shares.
- ☐ Documents relating to redemption or purchase of own share out of capital by private company.
- ☐ Register of debenture holders.
- ☐ Report to members of outcome of investigation by public company into interests in its shares.
- ☐ Register of interests in shares disclosed to public company.
- ☐ Instruments creating charges and register of charges: England and Wales or Northern Ireland.
- ☐ Instruments creating charges and register of charges: Scotland.

#### ④ Location of company records

If the company records are held at the registered office address, **do not** tick any of the boxes in this section.

Certain records must be kept by every company while other records are only kept by certain company types where appropriate.

If the records are not kept at the SAIL address, they must be available at the registered office.

If any of the company records have moved from the registered office to the address in Section A6 since the last annual return, you must complete form **AD03** and submit it together with this annual return.

## Part 2

### Officers of the company

This section should include details of the company as at the made up date of this annual return. All details must agree with those previously notified to Companies House.

#### Corporate officers

- For a **corporate secretary**, go to **Section B1**
- For a **corporate director**, go to **Section C1**

#### Individual officers

- For a **secretary** who is an individual, go to **Section D1**
- For a **director** who is an individual, go to **Section E1 and also complete Part 3**

#### New appointments

You cannot use this form to appoint new officers to the company. To do this, please complete the appropriate form and submit it together with this annual return:

- AP01 - for directors who are individuals
- AP02 - for a corporate director
- AP03 - for secretaries who are individuals
- AP04 - for a corporate secretary

#### Change to officer details

You cannot use this form to change any officer details. To do this, please complete the appropriate form and submit it together with this annual return:

- CH01 - for changes to details of directors who are individuals
- CH02 - for changes to details of a corporate director
- CH03 - for changes to details of secretary who are individuals
- CH04 - for changes to details of a corporate secretary

#### Continuation pages

Please use a continuation page if you need to enter more officer details.

## AR01 2015

Annual Return

## Corporate secretary

B1

## Corporate secretary's details ①

Please use this section for corporate secretaries of the company.  
For a secretary who is an individual, complete Section D1-D2.

Corporate body/firm name

BERITH (SECRETARIES) LIMITED

Building name/number

HAYWOOD HOUSE

Street

DUMFRIES PLACE

Post town

CARDIFF

County/Region

Postcode

C F 1 0 3 G A

Country

## ① Corporate secretary appointments

You cannot use this form to appoint a corporate secretary. To do this, please complete form AP04 and submit it together with this annual return.

## Corporate secretary details

All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form CH04.

This information will appear on the public record.

## Continuation pages

Please use a continuation page if you need to enter more officer details.

B2

## Location of the registry of the corporate body or firm

Is the corporate secretary registered within the European Economic Area (EEA)?

→ Yes Complete Section B3 only

→ No Complete Section B4 only

B3

## EEA companies ②

Please give details of the register where the company file is kept (including the relevant state) and the registration number in that register.

Where the company/firm is registered ②

ENGLAND/WALES

Registration number

02958053

## ② EEA

A full list of countries of the EEA can be found in our guidance:  
[www.gov.uk/companieshouse](http://www.gov.uk/companieshouse)

③ This is the register mentioned in Article 3 of the First Company Law Directive (68/151/EEC).

B4

## Non-EEA companies

Please give details of the legal form of the corporate body or firm and the law by which it is governed. If applicable, please also give details of the register in which it is entered (including the state) and its registration number in that register.

Legal form of the corporate body or firm

Governing law

If applicable, where the company/firm is registered ④

If applicable, the registration number

## ④ Non-EEA

Where you have provided details of the register (including state) where the company or firm is registered, you must also provide its number in that register.

## AR01 2015

Annual Return

## Corporate director

C1

## Corporate director's details ①

Please use this section for corporate directors of the company.  
For a director who is an individual, complete Section E1-E2 and Part 3.

Corporate body/firm name

Building name/number

Street

Post town

County/Region

Postcode

Country

## ① Corporate director appointments

You cannot use this form to appoint a corporate director. To do this, please complete form AP02 and submit it together with this annual return.

## Corporate director details

All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form CH02.

This information will appear on the public record.

## Continuation pages

Please use a continuation page if you need to enter more officer details.

C2

## Location of the registry of the corporate body or firm

Is the corporate director registered within the European Economic Area (EEA)?

→ Yes Complete Section C3 only

→ No Complete Section C4 only

C3

## EEA companies ①

Please give details of the register where the company file is kept (including the relevant state) and the registration number in that register.

Where the company/firm is registered ①

Registration number

## ① EEA

A full list of countries of the EEA can be found in our guidance:  
[www.gov.uk/companieshouse](http://www.gov.uk/companieshouse)

② This is the register mentioned in Article 3 of the First Company Law Directive (68/151/EEC).

C4

## Non-EEA companies

Please give details of the legal form of the corporate body or firm and the law by which it is governed. If applicable, please also give details of the register in which it is entered (including the state) and its registration number in that register.

Legal form of the corporate body or firm

Governing law

If applicable, where the company/firm is registered ①

If applicable, the registration number

## ① Non-EEA

Where you have provided details of the register (including state) where the company or firm is registered, you must also provide its number in that register



## AR01 2015

Annual Return

## Secretary

D1

Secretary's details <sup>①</sup>

Please use this section for individual secretaries of the company.  
For a corporate secretary, complete Section B1-B4.

Title\*

Full forename(s)

Surname

Former name(s) <sup>②</sup>**① Secretary appointments**

You may not use this form to appoint a secretary. To do this, please complete form AP03 and submit it together with this annual return.

**Corporate details**

Please use Section B1-B4 to enter corporate secretary details.

**Secretary details**

All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form CH03.

**② Former name(s)**

Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

**Continuation pages**

Please use a continuation page if you need to enter more officer details.

D2

Secretary's service address <sup>③</sup>

Building name/number

Street

Post town

County/Region

Postcode

Country

**③ Service address**

If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

AR01 2015  
Annual Return

Director

E1

Director's details ①

Please use this section to list individual directors of the company.  
For a corporate director, complete Section C1-C4.

Title*	DR														
Full forename(s)	PAULO FRANCESCO GIUSEPPE														
Surname	ANTONIAZZI														
Former name(s) ②															
Country/State of residence	UNITED KINGDOM														
Nationality	BRITISH														
Month/year of birth ③	<table border="1"> <tr> <td>X</td> <td>X</td> <td>m</td> <td>0</td> <td>m</td> <td>4</td> <td>y</td> <td>1</td> <td>y</td> <td>9</td> <td>y</td> <td>7</td> <td>y</td> <td>1</td> </tr> </table>	X	X	m	0	m	4	y	1	y	9	y	7	y	1
X	X	m	0	m	4	y	1	y	9	y	7	y	1		
Business occupation (if any)	ANAESTHETIST														

① Director appointments

You cannot use this form to appoint a director. To do this, please complete form AP01 and submit it together with this annual return.

Corporate details

Please use Section C1-C4 to enter corporate director details.

Director details

All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form CH01.

② Former name(s)

Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

③ Month and year of birth

Please provide month and year only. Provide full date of birth in Part 3 only.

Continuation pages

Please use a continuation page if you need to enter more officer details.

E2

Director's service address ④

Building name/number	17								
Street	TY WINDSOR								
	MARCONI AVENUE								
Post town	PENARTH								
County/Region	VALE OF GLAMORGAN								
Postcode	<table border="1"> <tr> <td>C</td> <td>F</td> <td>6</td> <td>4</td> <td></td> <td>1</td> <td>S</td> <td>T</td> </tr> </table>	C	F	6	4		1	S	T
C	F	6	4		1	S	T		
Country									

④ Service address

If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

## AR01 2015

Annual Return

## Director

E1

Director's details <sup>1</sup>

	Please use this section to list individual directors of the company. <b>For a corporate director, complete Section C1-C4.</b>													
Title*	DR													
Full forename(s)	FIONA													
Surname	BENJAMIN													
Former name(s) <sup>2</sup>														
Country/State of residence	UNITED KINGDOM													
Nationality	BRITISH													
Month/year of birth <sup>3</sup>	X	X	m	0	m	7	y	1	y	9	y	7	y	1
Business occupation (if any)	ANAESTHETIST													

<sup>1</sup> Director appointments

You cannot use this form to appoint a director. To do this, please complete form **AP01** and submit it together with this annual return.

**Corporate details**

Please use **Section C1-C4** to enter corporate director details.

**Director details**

All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form **CH01**.

<sup>2</sup> Former name(s)

Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

<sup>3</sup> Month and year of birth

Please provide month and year only. Provide full date of birth in Part 3 only.

**Continuation pages**

Please use a continuation page if you need to enter more officer details.

E2

Director's service address <sup>4</sup>

Building name/number	27									
Street	ST JOHNS CRESCENT									
	WHITCHURCH									
Post town	CARDIFF									
County/Region	SOUTH GLAMORGAN									
Postcode	C	F	1	4		7	A	F		
Country										

<sup>4</sup> Service address

If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

## AR01 2015

## Annual Return

## Director

E1

Director's details <sup>1</sup>

Please use this section to list individual directors of the company. <b>For a corporate director, complete Section C1-C4.</b>															
Title*	DR														
Full forename(s)	MICHAEL														
Surname	BRETLAND														
Former name(s) <sup>2</sup>															
Country/State of residence	UNITED KINGDOM														
Nationality	BRITISH														
Month/year of birth <sup>3</sup>	<table border="1"> <tr> <td>X</td> <td>X</td> <td>m</td> <td>0</td> <td>m</td> <td>6</td> <td>y</td> <td>1</td> <td>y</td> <td>9</td> <td>y</td> <td>7</td> <td>y</td> <td>2</td> </tr> </table>	X	X	m	0	m	6	y	1	y	9	y	7	y	2
X	X	m	0	m	6	y	1	y	9	y	7	y	2		
Business occupation (if any)	ANAESTHETIST														

<sup>1</sup> Director appointments

You cannot use this form to appoint a director. To do this, please complete form **AP01** and submit it together with this annual return.

**Corporate details**

Please use **Section C1-C4** to enter corporate director details.

**Director details**

All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form **CH01**.

<sup>2</sup> Former name(s)

Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

<sup>3</sup> Month and year of birth

Please provide month and year only. Provide full date of birth in Part 3 only.

**Continuation pages**

Please use a continuation page if you need to enter more officer details.

E2

Director's service address <sup>4</sup>

Building name/number	DEPARTMENT OF ANAESTHETICS PRINCESS OF WALES HOSPITAL								
Street	COITY ROAD								
Post town	BRIDGEND								
County/Region									
Postcode	<table border="1"> <tr> <td>C</td> <td>F</td> <td>3</td> <td>1</td> <td></td> <td>1</td> <td>R</td> <td>Q</td> </tr> </table>	C	F	3	1		1	R	Q
C	F	3	1		1	R	Q		
Country									

<sup>4</sup> Service address

If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

## AR01 2015

Annual Return

## Director

E1

Director's details <sup>①</sup>

Please use this section to list individual directors of the company. For a corporate director, complete Section C1-C4.															
Title*	DR														
Full forename(s)	MONICA														
Surname	CHAWATHE														
Former name(s) <sup>②</sup>															
Country/State of residence	UNITED KINGDOM														
Nationality	BRITISH														
Month/year of birth <sup>③</sup>	<table border="1"> <tr> <td>X</td> <td>X</td> <td>m</td> <td>0</td> <td>m</td> <td>6</td> <td>y</td> <td>1</td> <td>y</td> <td>9</td> <td>y</td> <td>7</td> <td>y</td> <td>0</td> </tr> </table>	X	X	m	0	m	6	y	1	y	9	y	7	y	0
X	X	m	0	m	6	y	1	y	9	y	7	y	0		
Business occupation (if any)	ANAESTHETIST														

<sup>①</sup> Director appointments

You cannot use this form to appoint a director. To do this, please complete form AP01 and submit it together with this annual return.

## Corporate details

Please use Section C1-C4 to enter corporate director details.

## Director details

All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form CH01.

<sup>②</sup> Former name(s)

Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

<sup>③</sup> Month and year of birth

Please provide month and year only. Provide full date of birth in Part 3 only.

## Continuation pages

Please use a continuation page if you need to enter more officer details.

E2

Director's service address <sup>①</sup>

Building name/number	21								
Street	LLEWELYN GOCH								
	PARC RHYDLAFER								
Post town	ST FAGANS								
County/Region	SOUTH GLAMORGAN								
Postcode	<table border="1"> <tr> <td>C</td> <td>F</td> <td>5</td> <td></td> <td>6</td> <td>H</td> <td>R</td> <td></td> </tr> </table>	C	F	5		6	H	R	
C	F	5		6	H	R			
Country									

<sup>①</sup> Service address

If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

## AR01 2015

Annual Return

## Director

E1

Director's details <sup>1</sup>

Please use this section to list individual directors of the company. For a corporate director, complete Section C1-C4.															
Title*	DR														
Full forename(s)	KARTHIKEYAN														
Surname	CHELLIAH														
Former name(s) <sup>2</sup>															
Country/State of residence	UNITED KINGDOM														
Nationality	BRITISH														
Month/year of birth <sup>3</sup>	<table border="1"> <tr> <td>X</td> <td>X</td> <td>m</td> <td>0</td> <td>m</td> <td>5</td> <td>y</td> <td>1</td> <td>y</td> <td>9</td> <td>y</td> <td>6</td> <td>y</td> <td>7</td> </tr> </table>	X	X	m	0	m	5	y	1	y	9	y	6	y	7
X	X	m	0	m	5	y	1	y	9	y	6	y	7		
Business occupation (if any)	ANAESTHETIST														

<sup>1</sup> Director appointments

You cannot use this form to appoint a director. To do this, please complete form AP01 and submit it together with this annual return.

## Corporate details

Please use Section C1-C4 to enter corporate director details.

## Director details

All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form CH01.

<sup>2</sup> Former name(s)

Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

<sup>3</sup> Month and year of birth

Please provide month and year only. Provide full date of birth in Part 3 only.

## Continuation pages

Please use a continuation page if you need to enter more officer details.

E2

Director's service address <sup>1</sup>

Building name/number	25								
Street	MILESTONE CRESCENT								
Post town	CARDIFF								
County/Region	SOUTH GLAMORGAN								
Postcode	<table border="1"> <tr> <td>C</td> <td>F</td> <td>1</td> <td>4</td> <td></td> <td>4</td> <td>N</td> <td>Q</td> </tr> </table>	C	F	1	4		4	N	Q
C	F	1	4		4	N	Q		
Country									

<sup>1</sup> Service address

If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

# AR01 2015

## Annual Return

### Director

#### E1 Director's details <sup>①</sup>

	Please use this section to list individual directors of the company. <b>For a corporate director, complete Section C1-C4.</b>													
Title*	DR													
Full forename(s)	GILLIAN SUZANNE													
Surname	DUNN													
Former name(s) <sup>②</sup>														
Country/State of residence	UNITED KINGDOM													
Nationality	BRITISH													
Month/year of birth <sup>③</sup>	X	X	m	0	m	3	y	1	y	9	y	6	y	3
Business occupation (if any)	ANAESTHETIST													

#### ① Director appointments

You cannot use this form to appoint a director. To do this, please complete form AP01 and submit it together with this annual return.

#### Corporate details

Please use Section C1-C4 to enter corporate director details.

#### Director details

All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form CH01.

#### ② Former name(s)

Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

#### ③ Month and year of birth

Please provide month and year only. Provide full date of birth in Part 3 only.

#### Continuation pages

Please use a continuation page if you need to enter more officer details.

#### E2 Director's service address <sup>①</sup>

Building name/number	55									
Street	AMESBURY ROAD									
Post town	CARDIFF									
County/Region										
Postcode	C	F	2	3		5	D	X		
Country										

#### ① Service address

If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

**Part 4****Statement of capital <sup>①</sup>**

Does your company have share capital?

→ **Yes** Complete the sections below and the following **Part 5**.→ **No** Go to **Part 6 (Signature)**.<sup>①</sup> This should reflect the company's capital status at the made up date of this annual return.**F1****Share capital**

Complete the table(s) below to show the issued share capital.

**Complete a separate table for each currency (if appropriate).** For example, add pound sterling in 'Currency table A' and Euros in 'Currency table B'.

Currency	Class of shares	Number of shares	Aggregate nominal value (£, €, \$, etc)	Total aggregate amount unpaid, if any (£, €, \$, etc)
Complete a separate table for each currency	E.g. Ordinary/Preference etc.		Number of shares issued multiplied by nominal value	Including both the nominal value and any share premium
<b>Currency table A</b>				
GBP	ORDINARY A	1.00000	1.00	
GBP	ORDINARY B	1.00000	1.00	
GBP	ORDINARY C	1.00000	1.00	
<b>Totals</b>		3.00000	3	0
<b>Currency table B</b>				
<b>Totals</b>			0	0
<b>Currency table C</b>				
<b>Totals</b>			0	0
<b>Totals (including continuation pages)</b>		Total number of shares	Total aggregate nominal value <sup>①</sup>	Total aggregate amount unpaid <sup>①</sup>
		23.000	23.00	0

<sup>①</sup> Please list total aggregate values in different currencies separately. For example: £100 + €100 + \$10 etc.



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**F2****Voting rights**

Please give the prescribed particulars of rights attached to shares for each class of share shown in the statement of capital share tables in **Section F1**.

Class of share

ORDINARY A

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

Class of share

ORDINARY B

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

Class of share

ORDINARY C

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

Class of share

ORDINARY D

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

## Part 5 Shareholders

Does your company have share capital?

- **Yes** go to **Section G1** 'Companies with share capital'.  
 → **No** Go to **Part 6 (Signature)**.

### G1 Companies with share capital

Question 1

Were any of the company's shares admitted to trading on a market at any time during this return period? Please tick the appropriate box below: <sup>①</sup>

- ☒ **No** go to **Section G2** 'Past and present shareholders'.  
☐ **Yes** go to **Question 2**.

Question 2

Please only refer to Question 2 below if you have answered 'Yes' to Question 1. If you answered 'No', please go to Section G2 'Past and present shareholders'.

Did the company, throughout the return period, have any shares admitted to trading on a relevant market and was it, throughout the return period, an issuer to which DTR5 applies? Please tick the appropriate box below: <sup>②</sup>

- ☐ **No** go to **Section G4** 'Shareholders who hold at least 5% of any class of shares of the company as at the made up date of the return'.  
☐ **Yes** go to **Part 6 (Signature)**

<sup>①</sup> A market is one established under the rules of the UK recognised investment exchange or any other regulated markets in or outside of the UK, or any other market outside of the UK. The current UK recognized investment exchanges and regulated markets can be found at: [www.fsa.gov.uk/register/exchanges.do](http://www.fsa.gov.uk/register/exchanges.do)

<sup>②</sup> DTR5 refers to the Vote Holder and Issuer Notification Rules contained in Chapter 5 of the Disclosure and Transparency Rules source book issued by the Financial Services Authority. Notification is required when the percentage acquisition of a shareholder in the company has reached a certain threshold (starting at 3%).

### G2 List of past and present shareholders <sup>③</sup>

The company is required to provide a full list of past and present shareholders if one was not included with either of the last two returns. Please tick the appropriate box below.

- ☐ There were no shareholders changes in this period. Go to **Part 6 (Signature)**.  
☒ A full list of shareholders is enclosed.  
☐ A list of shareholder changes is enclosed.

How is the list of shareholders enclosed. Please tick the appropriate box below:

- ☒ The list of shareholders is enclosed on paper. Go to **Section G3**. 'List of past and present shareholders'  
☐ The list of shareholders is enclosed in another format. Go to **Part 6 (Signature)**.

<sup>③</sup> This section only applies to companies answering 'No' in Section G1.

**AR01 2015**  
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**G3**

**List of past and present shareholders**

Changes during this period to shareholders' particulars or details of the amount of stock or shares transferred must be completed each year.

You must provide a 'full list' of all company shareholders on:

- The company's first annual return following incorporation;
- Every third annual return after a full list has been provided.

● Please list the company shareholders in alphabetical order.

Joint shareholders should be listed consecutively.

**Further shareholders**

Please use a 'List of past and present shareholders' continuation page if necessary.

This section only applies to companies answering 'No' to Question 1 in Section G1.

Shareholder's Name (Address not required)	Class of share	Shares or stock currently held	Shares or stock transferred (if appropriate)	
		Number of shares or amount of stock	Number of shares or amount of stock	Date of registration of transfer
SUSAN ELIZABETH ANTONIAZZI	ORDINARY T	1.00000		
OWEN BENJAMIN	ORDINARY S	1.00000		
MICHAEL BRETLAND	ORDINARY C	1.00000		
FRANCES MARIA BLOMELEY	ORDINARY A	1.00000		
HARVEY CAESAR	ORDINARY Q	1.00000		
MONICA CHAWATHE	ORDINARY R	1.00000		
KARTHIKEYAN CHELLIAH	ORDINARY F	1.00000		
GILLIAN SUZANNE DUNN	ORDINARY M	1.00000		
KATHLEEN EGGERS	ORDINARY N	1.00000		
RHIAN FARQUHARSON	ORDINARY W	1.00000		
ESTHER M FLAVELL	ORDINARY J	1.00000		
PRIMINORE SINGH GATAURE	ORDINARY H	1.00000		

### Annual Return

**G4**

**Shareholders who hold at least 5% of any class of share(s) of the company as at the made up date of this return**

This section should show only the shareholders that hold at least 5% of any class of share(s) of the company at the date of this return.

It should only be completed by companies that have answered 'Yes' to Question 1 in Section G1, and 'No' to Question 2 in Section G1.

If there were no shareholders holding at least 5% of any class of share(s) at the date of this return, this section may be left blank.

→ Go to **Part 6 (Signature)**

**This section only applies to companies answering 'No' to Question 2 in Section G1.**

Please list the company shareholders in alphabetical order.

Joint shareholders should be listed consecutively.

### Further shareholders

Please use a 'Shareholders who hold at least 5% of any class of share(s) of the company as at the made up date of this return' continuation page if necessary.

[illegible]

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**Part 6 Signature**

This must be completed by all companies.

I am signing this form on behalf of the company.

Signature

Signature

X



X

This form may be signed by:

Director <sup>①</sup>, Secretary, Person authorised <sup>②</sup>, Charity commission receiver and manager, CIC manager, Judicial factor.

**① Societas Europaea**

If the form is being filed on behalf of a Societas Europaea (SE) please delete 'director' and insert details of which organ of the SE the person signing has membership.

**② Person authorised**

Under either section 270 or 274 of the Companies Act 2006.



Do not cover this barcode

# AR01 2015

## Annual Return

### Presenter information

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

Contact name	EL
Company name	BERRY SMITH LLP
Address	HAYWOOD HOUSE DUMFRIES PLACE
Post town	CARDIFF
County/Region	
Postcode	C F 1 0 3 G A
Country	
DX	33097 CARDIFF 1
Telephone	029 2034 5511

### Checklist

**We may return forms completed incorrectly or with information missing.**

**Please make sure you have remembered the following:**

- ☐ The company name and number match the information held on the public Register.
- ☐ You have completed your principal business activity.
- ☐ You have not used this form to make changes to the registered office address.
- ☐ You have not used this form to make changes to secretary and director details.
- ☐ You have provided the full date of birth for all individual directors in Part 3.
- ☐ You have fully completed the Statement of capital (if applicable).
- ☐ You have signed the form.
- ☐ You have enclosed the correct fee.

### Important information

**Please note that all information on this form will appear on the public record.**

### How to pay

**A fee of £40 is payable to Companies House in respect of a paper Annual Return**

Make cheques or postal orders payable to 'Companies House.'

### Where to send

**You may return this form to any Companies House address, however for expediency we advise you to return it to the appropriate address below:**

#### **For companies registered in England and Wales:**

The Registrar of Companies, Companies House,  
Crown Way, Cardiff, Wales, CF14 3UZ.  
DX 33050 Cardiff.

#### **For companies registered in Scotland:**

The Registrar of Companies, Companies House,  
Fourth floor, Edinburgh Quay 2,  
139 Fountainbridge, Edinburgh, Scotland, EH3 9FF.  
DX ED235 Edinburgh 1  
or LP - 4 Edinburgh 2 (Legal Post).

#### **For companies registered in Northern Ireland:**

The Registrar of Companies, Companies House,  
Second Floor, The Linenhall, 32-38 Linenhall Street,  
Belfast, Northern Ireland, BT2 8BG.  
DX 481 N.R. Belfast 1.

### Further information

For further information, please see the guidance notes on the website at [www.gov.uk/companieshouse](http://www.gov.uk/companieshouse) or email [enquiries@companieshouse.gov.uk](mailto:enquiries@companieshouse.gov.uk)

**This form is available in an alternative format. Please visit the forms page on the website at [www.gov.uk/companieshouse](http://www.gov.uk/companieshouse)**

# AR01 2015 - continuation page

## Annual Return

### Director

E1 Director's details <sup>①</sup>	
Please use this section to list individual directors of the company. For a corporate director, complete Section C1-C4.	
Title*	DR
Full forename(s)	KATHLEEN
Surname	EGGERS
Former name(s) <sup>②</sup>	
Country/State of residence	UNITED KINGDOM
Nationality	BRITISH
Month/year of birth <sup>③</sup>	X X m 1 m 1 y 1 y 9 y 6 y 4
Business occupation (if any)	ANAESTHETIST

**① Director appointments**  
You cannot use this form to appoint a director. To do this, please complete form **AP01** and submit it together with this annual return.

**Corporate details**  
Please use **Section C1-C4** to enter corporate director details.

**Director details**  
All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form **CH01**.

**② Former name(s)**  
Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

**③ Month and year of birth**  
Please provide month and year only. Provide full date of birth in Part 3 only.

E2 Director's service address <sup>④</sup>	
Building name/number	4
Street	VICTORIA SQUARE
Post town	PENARTH
County/Region	VALE OF GLAMORGAN
Postcode	C F 6 4 1 S D
Country	

**④ Service address**  
If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

# AR01 2015 - continuation page

## Annual Return

### Director

**E1**

#### Director's details ①

Please use this section to list individual directors of the company. <b>For a corporate director, complete Section C1-C4.</b>	
Title*	DR
Full forename(s)	ANDREW
Surname	FARQUHARSON
Former name(s) ②	
Country/State of residence	UNITED KINGDOM
Nationality	BRITISH
Month/year of birth ③	<div> <div>X</div> <div>X</div> <div>0</div> <div>7</div> <div>1</div> <div>9</div> <div>6</div> <div>6</div> </div>
Business occupation (if any)	ANAESTHETISTS

#### ① Director appointments

You cannot use this form to appoint a director. To do this, please complete form **AP01** and submit it together with this annual return.

#### Corporate details

Please use **Section C1-C4** to enter corporate director details.

#### Director details

All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form **CH01**.

#### ② Former name(s)

Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

#### ③ Month and year of birth

Please provide month and year only. Provide full date of birth in Part 3 only.

**E2**

#### Director's service address ④

Building name/number	22
Street	MAIN ROAD
Post town	OGMORE BY SEA
County/Region	
Postcode	<div> <div>C</div> <div>F</div> <div>3</div> <div>2</div> <div>0</div> <div>P</div> <div>D</div> </div>
Country	

#### ④ Service address

If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.



# AR01 2015 - continuation page

## Annual Return

### Director

<b>E1</b>	<b>Director's details<sup>1</sup></b>	
	Please use this section to list individual directors of the company. For a corporate director, complete Section C1-C4.	
Title*	DR	
Full forename(s)	ESTHER MARY	
Surname	FLAVELL	
Former name(s) <sup>2</sup>		
Country/State of residence	UNITED KINGDOM	
Nationality	BRITISH	
Month/year of birth <sup>3</sup>	<div> <div>X</div> <div>X</div> <div>m</div> <div>0</div> <div>m</div> <div>6</div> <div>y</div> <div>1</div> <div>y</div> <div>9</div> <div>y</div> <div>7</div> <div>y</div> <div>6</div> </div>	
Business occupation (if any)	ANAESTHETISTS	

**1 Director appointments**  
You cannot use this form to appoint a director. To do this, please complete form **AP01** and submit it together with this annual return.

**Corporate details**  
Please use **Section C1-C4** to enter corporate director details.

**Director details**  
All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form **CH01**.

**2 Former name(s)**  
Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

**3 Month and year of birth**  
Please provide month and year only. Provide full date of birth in Part 3 only.

<b>E2</b>	<b>Director's service address<sup>4</sup></b>	
Building name/number	DEPARTMENT OF ANAESTHETICS PRICESS OF WALES HOSPITAL	
Street	COITY ROAD	
Post town	BRIDGEND	
County/Region	MID GLAMORGAN	
Postcode	<div> <div>C</div> <div>F</div> <div>3</div> <div>1</div> <div></div> <div>1</div> <div>R</div> <div>Q</div> </div>	
Country		

**4 Service address**  
If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

# AR01 2015 - continuation page

## Annual Return

### Director

E1 Director's details <sup>1</sup>	
Please use this section to list individual directors of the company. For a corporate director, complete Section C1-C4.	
Title*	DR
Full forename(s)	PREMINDER SINGH
Surname	GATAURE
Former name(s) <sup>2</sup>	
Country/State of residence	UNITED KINGDOM
Nationality	BRITISH
Month/year of birth <sup>3</sup>	<div>X</div> <div>X</div> <div>0</div> <div>8</div> <div>1</div> <div>9</div> <div>6</div> <div>1</div>
Business occupation (if any)	ANAESTHETISTS

**1 Director appointments**  
You cannot use this form to appoint a director. To do this, please complete form AP01 and submit it together with this annual return.

**Corporate details**  
Please use Section C1-C4 to enter corporate director details.

**Director details**  
All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form CH01.

**2 Former name(s)**  
Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

**3 Month and year of birth**  
Please provide month and year only. Provide full date of birth in Part 3 only.

  

E2 Director's service address <sup>4</sup>	
Building name/number	42
Street	FRIARS ROAD
Post town	NEWPORT
County/Region	SOUTH WALES
Postcode	<div>N</div> <div>P</div> <div>2</div> <div>0</div> <div>4</div> <div>E</div> <div>Z</div>
Country	

**4 Service address**  
If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

## Director

<b>E1</b>	<b>Director's details<sup>1</sup></b>	
	Please use this section to list individual directors of the company. For a corporate director, complete Section C1-C4.	
Title*	DR	
Full forename(s)	EIRWYN BYRON	
Surname	HOWELLS	
Former name(s) <sup>2</sup>		
Country/State of residence	UNITED KINGDOM	
Nationality	BRITISH	
Month/year of birth <sup>3</sup>	<div> <div>X</div> <div>X</div> <div>m</div> <div>1</div> <div>m</div> <div>1</div> <div>y</div> <div>1</div> <div>y</div> <div>9</div> <div>y</div> <div>6</div> <div>y</div> <div>5</div> </div>	
Business occupation (if any)	ANAESTHETISTS	

**1 Director appointments**  
You cannot use this form to appoint a director. To do this, please complete form AP01 and submit it together with this annual return.

**Corporate details**  
Please use Section C1-C4 to enter corporate director details.

**Director details**  
All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form CH01.

**2 Former name(s)**  
Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

**3 Month and year of birth**  
Please provide month and year only. Provide full date of birth in Part 3 only.

<b>E2</b>	<b>Director's service address<sup>4</sup></b>	
Building name/number	HIGHFIELD HOUSE	
Street	BRIDGE ROAD	
	LLANBLETHIAN	
Post town	COWBRIDGE	
County/Region	VALE OF GLAMORGAN	
Postcode	C F 7 1 7 J G	
Country		

**4 Service address**  
If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

# AR01 2015 - continuation page

## Annual Return

### Director

E1 Director's details <sup>1</sup>	
Please use this section to list individual directors of the company. For a corporate director, complete Section C1-C4.	
Title*	DR
Full forename(s)	JONATHAN CHARLES
Surname	HUGHES
Former name(s) <sup>2</sup>	
Country/State of residence	UNITED KINGDOM
Nationality	BRITISH
Month/year of birth <sup>3</sup>	<div>X</div> <div>X</div> <div>0</div> <div>3</div> <div>1</div> <div>9</div> <div>6</div> <div>6</div>
Business occupation (if any)	ANAESTHETISTS

**1 Director appointments**  
You cannot use this form to appoint a director. To do this, please complete form AP01 and submit it together with this annual return.

**Corporate details**  
Please use Section C1-C4 to enter corporate director details.

**Director details**  
All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form CH01.

**2 Former name(s)**  
Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

**3 Month and year of birth**  
Please provide month and year only. Provide full date of birth in Part 3 only.

E2 Director's service address <sup>4</sup>	
Building name/number	BARN COTTAGE
Street	ST MARYS CHURCH
Post town	COWBRIDGE
County/Region	VALE OF GLAMORGAN
Postcode	<div>C</div> <div>F</div> <div>7</div> <div>1</div> <div>7</div> <div>L</div> <div>T</div>
Country	

**4 Service address**  
If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

# AR01 2015 - continuation page

## Annual Return

### Director

<b>E1</b>	<b>Director's details<sup>①</sup></b>	
	Please use this section to list individual directors of the company. For a corporate director, complete Section C1-C4.	
Title*	DR	
Full forename(s)	NATALIE SIAN	
Surname	MORGAN	
Former name(s) <sup>②</sup>		
Country/State of residence	UNITED KINGDOM	
Nationality	BRITISH	
Month/year of birth <sup>③</sup>	<div> <div>X</div> <div>X</div> <div>m</div> <div>1</div> <div>m</div> <div>2</div> <div>y</div> <div>1</div> <div>y</div> <div>9</div> <div>y</div> <div>7</div> <div>y</div> <div>0</div> </div>	
Business occupation (if any)	ANAESTHETIST	

**① Director appointments**  
You cannot use this form to appoint a director. To do this, please complete form AP01 and submit it together with this annual return.

**Corporate details**  
Please use Section C1-C4 to enter corporate director details.

**Director details**  
All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form CH01.

**② Former name(s)**  
Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

**③ Month and year of birth**  
Please provide month and year only. Provide full date of birth in Part 3 only.

  

<b>E2</b>	<b>Director's service address<sup>④</sup></b>	
Building name/number	6	
Street	SANDY LANE	
Post town	YSTRADOEN	
County/Region	SOUTH GLAMORGAN	
Postcode	<div> <div>C</div> <div>F</div> <div>7</div> <div>1</div> <div></div> <div>7</div> <div>T</div> <div>Z</div> </div>	
Country		

**④ Service address**  
If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

# AR01 2015 - continuation page

## Annual Return

### Director

E1 Director's details <sup>1</sup>	
Please use this section to list individual directors of the company. For a corporate director, complete Section C1-C4.	
Title*	DR
Full forename(s)	DERMOT GEORGE
Surname	NICOLSON
Former name(s) <sup>2</sup>	
Country/State of residence	UNITED KINGDOM
Nationality	BRITISH
Month/year of birth <sup>3</sup>	<div> <div>X</div> <div>X</div> <div>m</div> <div>0</div> <div>m</div> <div>8</div> <div>y</div> <div>1</div> <div>y</div> <div>9</div> <div>y</div> <div>7</div> <div>y</div> <div>1</div> </div>
Business occupation (if any)	ANAESTHETIST

**1 Director appointments**  
You cannot use this form to appoint a director. To do this, please complete form AP01 and submit it together with this annual return.

**Corporate details**  
Please use Section C1-C4 to enter corporate director details.

**Director details**  
All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form CH01.

**2 Former name(s)**  
Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

**3 Month and year of birth**  
Please provide month and year only. Provide full date of birth in Part 3 only.

E2 Director's service address <sup>4</sup>	
Building name/number	DEPARTMENT OF ANAESTHETICS PRINCESS OF WALES HOSPITAL
Street	COITY ROAD
Post town	BRIDGEND
County/Region	MID GLAMORGAN
Postcode	<div> <div>C</div> <div>F</div> <div>3</div> <div>1</div> <div></div> <div>1</div> <div>R</div> <div>Q</div> </div>
Country	

**4 Service address**  
If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

# AR01 2015 - continuation page

## Annual Return

### Director

E1 Director's details <sup>1</sup>															
	Please use this section to list individual directors of the company. For a corporate director, complete Section C1-C4.														
Title*	DR														
Full forename(s)	JOHN ANTONY														
Surname	OSBORNE														
Former name(s) <sup>2</sup>															
Country/State of residence	UNITED KINGDOM														
Nationality	BRITISH														
Month/year of birth <sup>3</sup>	<table border="1"> <tr> <td>X</td> <td>X</td> <td>m</td> <td>0</td> <td>m</td> <td>8</td> <td>y</td> <td>1</td> <td>y</td> <td>9</td> <td>y</td> <td>6</td> <td>y</td> <td>3</td> </tr> </table>	X	X	m	0	m	8	y	1	y	9	y	6	y	3
X	X	m	0	m	8	y	1	y	9	y	6	y	3		
Business occupation (if any)	ANAESTHETIST														

**1 Director appointments**  
You cannot use this form to appoint a director. To do this, please complete form AP01 and submit it together with this annual return.

**Corporate details**  
Please use Section C1-C4 to enter corporate director details.

**Director details**  
All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form CH01.

**2 Former name(s)**  
Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

**3 Month and year of birth**  
Please provide month and year only. Provide full date of birth in Part 3 only.

E2 Director's service address <sup>4</sup>									
Building name/number	DIAMOND HOUSE								
Street	WESTGATE								
Post town	COWBRIDGE								
County/Region	VALE OF GLAMORGAN								
Postcode	<table border="1"> <tr> <td>C</td> <td>F</td> <td>7</td> <td>1</td> <td></td> <td>7</td> <td>A</td> <td>Q</td> </tr> </table>	C	F	7	1		7	A	Q
C	F	7	1		7	A	Q		
Country									

**4 Service address**  
If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

# AR01 2015 - continuation page

## Annual Return

### Director

**E1**

#### Director's details<sup>①</sup>

Please use this section to list individual directors of the company. <b>For a corporate director, complete Section C1-C4.</b>	
Title*	DR
Full forename(s)	GARETH
Surname	PARRY
Former name(s) <sup>②</sup>	
Country/State of residence	UNITED KINGDOM
Nationality	BRITISH
Month/year of birth <sup>③</sup>	<div> <div>X</div> <div>X</div> <div>m</div> <div>0</div> <div>m</div> <div>5</div> <div>y</div> <div>1</div> <div>y</div> <div>9</div> <div>y</div> <div>7</div> <div>y</div> <div>0</div> </div>
Business occupation (if any)	ANAESTHETIST

#### ① Director appointments

You cannot use this form to appoint a director. To do this, please complete form **AP01** and submit it together with this annual return.

#### Corporate details

Please use **Section C1-C4** to enter corporate director details.

#### Director details

All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form **CH01**.

#### ② Former name(s)

Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

#### ③ Month and year of birth

Please provide month and year only. Provide full date of birth in Part 3 only.

**E2**

#### Director's service address<sup>④</sup>

Building name/number	9
Street	THE RETREAT
Post town	PORTHCAWL
County/Region	MID GLAMORGAN
Postcode	<div> <div>C</div> <div>F</div> <div>3</div> <div>6</div> <div></div> <div>3</div> <div>R</div> <div>U</div> </div>
Country	

#### ④ Service address

If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.



# AR01 2015 - continuation page

## Annual Return

### Director

<b>E1</b>	<b>Director's details<sup>1</sup></b>	
	Please use this section to list individual directors of the company. <b>For a corporate director, complete Section C1-C4.</b>	
Title*	DR	
Full forename(s)	SIMON DAVID	
Surname	POULTER	
Former name(s) <sup>2</sup>		
Country/State of residence	UNITED KINGDOM	
Nationality	BRITISH	
Month/year of birth <sup>3</sup>	<div> <div>X</div> <div>X</div> <div>m</div> <div>0</div> <div>m</div> <div>2</div> <div>y</div> <div>1</div> <div>y</div> <div>9</div> <div>y</div> <div>6</div> <div>y</div> <div>6</div> </div>	
Business occupation (if any)	ANAESTHETIST	

**1 Director appointments**  
You cannot use this form to appoint a director. To do this, please complete form **AP01** and submit it together with this annual return.

**Corporate details**  
Please use **Section C1-C4** to enter corporate director details.

**Director details**  
All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form **CH01**.

**2 Former name(s)**  
Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

**3 Month and year of birth**  
Please provide month and year only. Provide full date of birth in Part 3 only.

<b>E2</b>	<b>Director's service address<sup>4</sup></b>	
Building name/number	PARK FARM	
Street		
Post town	BRIDGEND	
County/Region	BRD COUNTY BOROUGH	
Postcode	<div> <div>C</div> <div>F</div> <div>3</div> <div>2</div> <div></div> <div>0</div> <div>E</div> <div>H</div> </div>	
Country		

**4 Service address**  
If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

# AR01 2015 - continuation page

## Annual Return

### Director

<b>E1</b>	<b>Director's details<sup>1</sup></b>	
	Please use this section to list individual directors of the company. <b>For a corporate director, complete Section C1-C4.</b>	
Title*	DR	
Full forename(s)	RICHARD JAMES	
Surname	SELF	
Former name(s) <sup>2</sup>		
Country/State of residence	UNITED KINGDOM	
Nationality	BRITISH	
Month/year of birth <sup>3</sup>	<div> <div>X</div> <div>X</div> <div>m</div> <div>0</div> <div>m</div> <div>8</div> <div>y</div> <div>1</div> <div>y</div> <div>9</div> <div>y</div> <div>6</div> <div>y</div> <div>5</div> </div>	
Business occupation (if any)	ANAESTHETIST	

**1 Director appointments**  
You cannot use this form to appoint a director. To do this, please complete form **AP01** and submit it together with this annual return.

**Corporate details**  
Please use **Section C1-C4** to enter corporate director details.

**Director details**  
All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form **CH01**.

**2 Former name(s)**  
Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

**3 Month and year of birth**  
Please provide month and year only. Provide full date of birth in Part 3 only.

<b>E2</b>	<b>Director's service address<sup>4</sup></b>	
Building name/number	13	
Street	LON CAE PORTH	
Post town	CARDIFF	
County/Region		
Postcode	<div> <div>C</div> <div>F</div> <div>1</div> <div>4</div> <div></div> <div>6</div> <div>Q</div> <div>L</div> </div>	
Country		

**4 Service address**  
If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

# AR01 2015 - continuation page

## Annual Return

### Director

<b>E1</b>	<b>Director's details<sup>①</sup></b>	
	Please use this section to list individual directors of the company. For a corporate director, complete Section C1-C4.	
Title*	DR	
Full forename(s)	DAVID GARY	
Surname	THOMAS	
Former name(s) <sup>②</sup>		
Country/State of residence	UNITED KINGDOM	
Nationality	BRITISH	
Month/year of birth <sup>③</sup>	<div> <div>X</div> <div>X</div> <div>m</div> <div>0</div> <div>m</div> <div>9</div> <div>y</div> <div>1</div> <div>y</div> <div>9</div> <div>y</div> <div>5</div> <div>y</div> <div>7</div> </div>	
Business occupation (if any)	ANAESTHETIST	

**① Director appointments**  
You cannot use this form to appoint a director. To do this, please complete form **AP01** and submit it together with this annual return.

**Corporate details**  
Please use **Section C1-C4** to enter corporate director details.

**Director details**  
All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form **CH01**.

**② Former name(s)**  
Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

**③ Month and year of birth**  
Please provide month and year only. Provide full date of birth in Part 3 only.

  

<b>E2</b>	<b>Director's service address<sup>④</sup></b>	
Building name/number	4	
Street	BROOKFIELD PARK ROAD	
	BROOKFIELD PARK	
Post town	COWBRIDGE	
County/Region	VALE OF GLAMORGAN	
Postcode	<div> <div>C</div> <div>F</div> <div>7</div> <div>1</div> <div></div> <div>7</div> <div>H</div> <div>J</div> </div>	
Country		

**④ Service address**  
If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

## Director

E1 Director's details <sup>①</sup>	
Please use this section to list individual directors of the company. For a corporate director, complete Section C1-C4.	
Title*	DR
Full forename(s)	VIJAYALAKSHMI
Surname	VARADARAJAN
Former name(s) <sup>②</sup>	
Country/State of residence	UNITED KINGDOM
Nationality	BRITISH
Month/year of birth <sup>③</sup>	X X    m 0 m 7    y 1 y 9 y 7 y 1
Business occupation (if any)	ANAESTHETIST

**① Director appointments**  
You cannot use this form to appoint a director. To do this, please complete form AP01 and submit it together with this annual return.

**Corporate details**  
Please use Section C1-C4 to enter corporate director details.

**Director details**  
All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form CH01.

**② Former name(s)**  
Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

**③ Month and year of birth**  
Please provide month and year only. Provide full date of birth in Part 3 only.

E2 Director's service address <sup>④</sup>	
Building name/number	1
Street	OCHR Y COED, OFF EXCALIBUR DRIVE THORNHILL
Post town	CARDIFF
County/Region	
Postcode	C F 1 4    9 G B
Country	

**④ Service address**  
If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

## Director

<b>E1</b>	<b>Director's details<sup>1</sup></b>	
	Please use this section to list individual directors of the company. <b>For a corporate director, complete Section C1-C4.</b>	
Title*	DR	
Full forename(s)	JONATHAN CRAIG	
Surname	WILLIAMS	
Former name(s) <sup>2</sup>		
Country/State of residence	UNITED KINGDOM	
Nationality	BRITISH	
Month/year of birth <sup>3</sup>	<div> <div>X</div> <div>X</div> <div>m</div> <div>0</div> <div>m</div> <div>8</div> <div>y</div> <div>1</div> <div>y</div> <div>9</div> <div>y</div> <div>6</div> <div>y</div> <div>8</div> </div>	
Business occupation (if any)	ANAESTHETIST	

**1 Director appointments**  
You cannot use this form to appoint a director. To do this, please complete form **AP01** and submit it together with this annual return.

**Corporate details**  
Please use **Section C1-C4** to enter corporate director details.

**Director details**  
All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and have not notified us, please complete form **CH01**.

**2 Former name(s)**  
Please provide any previous names (including maiden or married names) which have been used for business purposes during the period of this return.

**3 Month and year of birth**  
Please provide month and year only. Provide full date of birth in Part 3 only.

  

<b>E2</b>	<b>Director's service address<sup>4</sup></b>	
Building name/number	TY LLANGOED	
Street	13 EGLWYS NUNYDD	
	MARGHAM	
Post town	PORT TALBOT	
County/Region	NEATH PORT TALBOT	
Postcode	<div> <div>C</div> <div>A</div> <div>1</div> <div>3</div> <div></div> <div>2</div> <div>P</div> <div>S</div> </div>	
Country		

**4 Service address**  
If you have previously notified Companies House that the service address is at 'The Company's Registered Office', please state 'The Company's Registered Office' in the address.

This information will appear on the public record.

# AR01 2015 - continuation page

## Annual Return

**F2**

### Voting rights

Class of share

ORDINARY E

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

## AR01 2015 - continuation page

### Annual Return

**F2**

#### Voting rights

Class of share

ORDINARY F

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

# AR01 2015 - continuation page

## Annual Return

**F2**

### Voting rights

Class of share

ORDINARY G

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE



# AR01 2015 - continuation page

## Annual Return

**F2**

### Voting rights

Class of share

ORDINARY H

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

# AR01 2015 - continuation page

## Annual Return

F2	Voting rights
Class of share	ORDINARY I
Voting rights	FULL VOTING RIGHTS RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP NOT REDEEMABLE

# AR01 2015 - continuation page

## Annual Return

**F2**

### Voting rights

Class of share

ORDINARY J

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

**F2**

### Voting rights

Class of share

ORDINARY K

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

## AR01 2015 - continuation page

### Annual Return

**F2**

#### Voting rights

Class of share

ORDINARY L

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

# AR01 2015 - continuation page

## Annual Return

**F2**

### Voting rights

Class of share

ORDINARY M

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

# AR01 2015 - continuation page

## Annual Return

**F2**

### Voting rights

Class of share

ORDINARY N

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

# AR01 2015 - continuation page

## Annual Return

**F2**

### Voting rights

Class of share

ORDINARY O

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE



# AR01 2015 - continuation page

## Annual Return

**F2**

### Voting rights

Class of share

ORDINARY P

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

# AR01 2015 - continuation page

## Annual Return

**F2**

### Voting rights

Class of share

ORDINARY Q

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

# AR01 2015 - continuation page

## Annual Return

**F2**

### Voting rights

Class of share

ORDINARY R

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

## AR01 2015 - continuation page

### Annual Return

**F2**

#### Voting rights

Class of share	ORDINARY S
Voting rights	FULL VOTING RIGHTS RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP NOT REDEEMABLE

# AR01 2015 - continuation page

## Annual Return

F2	Voting rights
Class of share	ORDINARY T
Voting rights	FULL VOTING RIGHTS RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP NOT REDEEMABLE

# AR01 2015 - continuation page

## Annual Return

**F2**

### Voting rights

Class of share

ORDINARY U

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

## AR01 2015 - continuation page

### Annual Return

**F2**

#### Voting rights

Class of share

ORDINARY V

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE

# AR01 2015 - continuation page

## Annual Return

**F2**

### Voting rights

Class of share

ORDINARY W

Voting rights

FULL VOTING RIGHTS  
RIGHT TO PARTICIPATE IN DIVIDENDS AND DISTRIBUTION  
RIGHT TO PARTICIPATION IN A DISTRIBUTION AND WINDING UP  
NOT REDEEMABLE



# AR01 2015 - continuation page

## Annual Return

**G3**

### List of past and present shareholders <sup>①</sup>

Changes during this period to shareholders' particulars or details of the amount of stock or shares transferred must be completed each year.

You must provide a 'full list' of all company shareholders on:

- The company's first annual return following incorporation;
- Every third annual return after a full list has been provided.

<sup>①</sup>Please list the company shareholders in alphabetical order.

Joint shareholders should be listed consecutively.

This section only applies to companies answering 'No' to Question 1 in Section G1.

Shareholder's Name (Address not required)	Class of share	Shares or stock currently held	Shares or stock transferred (if appropriate)	
		Number of shares or amount of stock	Number of shares or amount of stock	Date of registration of transfer
PAT HALLUM	ORDINARY E	1.00000		
KATHERINE LUCY HOWELLS	ORDINARY P	1.00000		
ANN CATHERINE HUGHES	ORDINARY B	1.00000		
KATHRYN E LEWIS	ORDINARY L	1.00000		
NATALIE SIAN MORGAN	ORDINARY U	1.00000		
SARAH LOUISE NICOLSON	ORDINARY O	1.00000		
ANTONIA PARRY	ORDINARY V	1.00000		
DAFYDD E PARRY	ORDINARY J		1.00000	01/04/2011
SIMON DAVID POULTER	ORDINARY D		1.00000	23/05/2011
CAROLYN J POULTER	ORDINARY D	1.00000		
HELEN ELIZABETH REID	ORDINARY O		1.00000	31/03/2011
MARY SELF	ORDINARY I	1.00000		

List of past and present shareholders <sup>①</sup>

You must provide a 'full list' of all company shareholders on:

- The company's first annual return following incorporation;
- Every third annual return after a full list has been provided.

This section only applies to companies answering 'No' to Question 1 in Section G1.

06/16 Version 9.0