



Companies House

AR01 (ef)

Annual Return



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Company Name: **ABACUS CHILDRENS NURSERIES LIMITED**

Company Number: **04737650**

Date of this return: **17/04/2015**

SIC codes: **85100**

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

Situation of Registered Office: **BALCARRES
SOUTHFLEET AVENUE
NEW BARN LONGFIELD
GRAVESEND KENT
DA3 7JG**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **MRS. LINDA JOAN**

Surname: **MANNING**

Former names:

Service Address: **27 LEWIS ROAD LEWIS ROAD
ISTEAD RISE
GRAVESEND
KENT
ENGLAND
DA13 9JQ**

Company Director **1**

Type: **Person**
Full forename(s): **MRS. LINDA JOAN**

Surname: **MANNING**

Former names:

Service Address: **27 LEWIS ROAD
ISTEAD RISE
GRAVESEND
KENT
ENGLAND
DA13 9JQ**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **09/07/1959** *Nationality:* **BRITISH**
Occupation: **FINANCE DIRECTOR**

Company Director 2

Type: **Person**

Full forename(s): **MRS. KAREN ELIZABETH**

Surname: **PHILLIPS**

Former names:

Service Address: **30 CRAYFORD ROAD
DARTFORD
KENT
DA1 4AY**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **12/09/1971** *Nationality:* **BRITISH**

Occupation: **OPERATIONS DIRECTOR**

Statement of Capital (Share Capital)

Class of shares	ORDINARY	<i>Number allotted</i>	100
		<i>Aggregate nominal value</i>	100
<i>Currency</i>	GBP	<i>Amount paid per share</i>	0
		<i>Amount unpaid per share</i>	0
<i>Prescribed particulars</i>			
NO CHANGE			

Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	100
		<i>Total aggregate nominal value</i>	100

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 17/04/2015 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 : **50 ORDINARY shares held as at the date of this return**
Name: **LINDA MANNING**

Shareholding 2 : **50 ORDINARY shares held as at the date of this return**
Name: **KAREN PHILLIPS**

Authorisation

Authenticated

This form was authorised by one of the following:

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