



Companies House
— for the record —

AR01 (ef)

Annual Return



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Company Name: **NEWMAN GILES PAINES & CO LIMITED**

Company Number: **05241012**

Date of this return: **16/09/2013**

SIC codes: **82990**

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

Situation of Registered Office: **68 SUNNYFIELDS DRIVE
HALFWAY
SHEERNESS
KENT
ME12 3DH**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **AMANDA GAY**

Surname: **PAINES**

Former names:

Service Address: **40 WOODSTOCK ROAD
SITTINGBOURNE
KENT
ME10 4HN**

Company Director **1**

Type: **Person**

Full forename(s): **AMANDA GAY**

Surname: **PAINES**

Former names:

Service Address: **40 WOODSTOCK ROAD
SITTINGBOURNE
KENT
ME10 4HN**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **04/12/1965**

Nationality: **BRITISH**

Occupation: **DIRECTOR**

Company Director 2

Type: **Person**
Full forename(s): **NICHOLAS CHARLES HAMAR**

Surname: **PAINES**

Former names:

Service Address: **40 WOODSTOCK ROAD
SITTINGBOURNE
KENT
ME10 4HN**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **15/06/1954** *Nationality:* **BRITISH**
Occupation: **CONSULTANT**

Statement of Capital (Share Capital)

Class of shares	ORDINARY	<i>Number allotted</i>	1000
		<i>Aggregate nominal value</i>	1000
<i>Currency</i>	GBP	<i>Amount paid per share</i>	0
		<i>Amount unpaid per share</i>	0
<i>Prescribed particulars</i>			
FULL VOTING RIGHTS			

Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	1000
		<i>Total aggregate nominal value</i>	1000

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 16/09/2013 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 : **550 ORDINARY shares held as at the date of this return**
Name: **AMANDA GAY PAINES**

Shareholding 2 : **450 ORDINARY shares held as at the date of this return**
Name: **NICHOLAS CHARLES PAINES**

Authorisation

Authenticated

This form was authorised by one of the following:

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