



Companies House

AR01 (ef)

Annual Return



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Company Name: **CAMPHILL INSURANCE AGENCY LIMITED**

Company Number: **05471220**

Date of this return: **03/06/2016**

SIC codes: **96090**

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

Situation of Registered Office: **C/O TIM DAVIES
CAMPHILL MILTON KEYNES JAPONICA LANE
WILLEN PARK
MILTON KEYNES
ENGLAND
MK15 9JY**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **MR ALEXANDER BRUCE**

Surname: **BENNET**

Former names:

Service Address: **55 TORPHIN ROAD
EDINBURGH
SCOTLAND
EH13 0PQ**

Company Director **1**

Type: **Person**

Full forename(s): **MR ALEXANDER BRUCE**

Surname: **BENNET**

Former names:

Service Address: **55 TORPHIN ROAD
EDINBURGH
SCOTLAND
EH13 0PQ**

Country/State Usually Resident: **SCOTLAND**

Date of Birth: ****/09/1952**

Nationality: **BRITISH**

Occupation: **DIRECTOR**

Company Director 2

Type: **Person**
Full forename(s): **MR TIMOTHY MARTIN**

Surname: **DAVIES**

Former names:

Service Address: **CAMPHILL MILTON KEYNES COMMUNITIES LTD JAPONICA
LANE
WILLEN PARK SOUTH
MILTON KEYNES
ENGLAND
MK15 9JY**

Country/State Usually Resident: **ENGLAND**

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

Occupation: **CHIEF EXECUTIVE**

Company Director **3**

Type: **Person**

Full forename(s): **MR JOSEPH OLIVER**

Surname: **LYNCH**

Former names:

Service Address: **35 ARD RI
BEAMORE ROAD
DROGHEDA
IRELAND**

Country/State Usually Resident: **IRELAND**

Date of Birth: ****/02/1963** *Nationality:* **IRISH**

Occupation: **MANAGER**

Company Director 4

Type: **Person**

Full forename(s): **MR DAVID GEORGE**

Surname: **NICHOLSON**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **SCOTLAND**

Date of Birth: ****/01/1955**

Nationality: **BRITISH**

Occupation: **FINANCE MANAGER**

Company Director **5**

Type: **Person**
Full forename(s): **MR GEOFFREY ROY**

Surname: **WEIR**

Former names:

Service Address: **177 CRAWFORDSBURN ROAD
CRAWFORDSBURN
COUNTY DOWN
NORTHERN IRELAND
BT19 1BT**

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

Date of Birth: ****/01/1960** *Nationality:* **BRITISH**
Occupation: **CHARTERED ACCOUNTANT**

Authorisation

Authenticated

This form was authorised by one of the following:

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