



*Companies House*  
— for the record —

**AR01** (ef)

**Annual Return**



XKSGKE1O

Received for filing in Electronic Format on the: **12/10/2009**

*Company Name:* **51 CANTELUPE ROAD MANAGEMENT COMPANY LIMITED**

*Company Number:* **05581591**

*Date of this return:* **03/10/2009**

*SIC codes:* **9800**

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

*Situation of Registered Office:* **51 CANTELUPE ROAD  
BEXHILL ON SEA  
EAST SUSSEX  
TN40 1HZ**

**Officers of the company**

*Company Secretary* **I**

*Type:* **Person**

*Full forename(s):* **TERESA ANN**

*Surname:* **DEEPROSE**

*Former names:*

*Service Address:* **FLAT 3 51 CANTELUPE ROAD  
BEXHILL ON SEA  
EAST SUSSEX  
TN40 1HZ**

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*Company Director* ***I***

*Type:* **Person**

*Full forename(s):* **DANIEL ALAN**

*Surname:* **BYLES**

*Former names:*

*Service Address:* **10 VISCOUNT POINT  
199 THE BROADWAY  
WIMBLEDON  
SW19 1NL**

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

*Date of Birth:* **24/06/1974** *Nationality:* **BRITISH**

*Occupation:* **MAJOR IN BRITISH ARMY**

*Company Director*      **2**

*Type:*                              **Person**

*Full forename(s):*              **JANICE**

*Surname:*                        **MEEK**

*Former names:*

*Service Address:*              **10 VISCOUNT POINT  
199 THE BROADWAY  
WIMBLEDON  
SW19 1NL**

*Country/State Usually Resident:*   **ENGLAND**

*Date of Birth:*   **12/12/1944**                              *Nationality:*   **BRITISH**

*Occupation:*    **MOTIVATIONAL SPEAKER**

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*Company Director*      **3**

*Type:*                              **Person**

*Full forename(s):*              **JANE MERCEDES**

*Surname:*                        **RUTHERFORD**

*Former names:*

*Service Address:*              **FLAT 2 51 CANTELUPE ROAD  
BEXHILL ON SEA  
EAST SUSSEX  
TN40 1HZ**

*Country/State Usually Resident:*   **ENGLAND**

*Date of Birth:*   **09/09/1969**                              *Nationality:*   **BRITISH**

*Occupation:*    **PRACTICE MANAGER**

## Presenter information

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*Contact Name:*

*Address:*

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## *Authorisation*

*Authenticated*

*This form was authorised by one of the following:*

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