

AR01 (ef)

Annual Return



Received for filing in Electronic Format on the:

10/11/2009

Company Name:

ABRIDGE SYSTEMS LIMITED

Company Number:

05601298

Date of this return:

23/10/2009

SIC codes:

7260

Company Type:

Private company limited by shares

Situation of Registered

TURNPIKE HOUSE

Office:

1208-1210 LONDON ROAD

LEIGH-ON-SEA

ESSEX SS9 2UA

Officers of the company

Company Secretary

Type:

Person

Full forename(s):

LISA MARIE

Surname:

PHELPS

Former names:

Service Address:

1 Company Director

Type: Person

Full forename(s): **JASON DARREL**

PHELPS Surname:

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: UNITED KINGDOM

Date of Birth: 30/08/1970 Nationality: BRITISH

Occupation: **DIRECTOR**

Company Director

Type: Person

Full forename(s): LISA MARIE

Surname: **PHELPS**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: UNITED KINGDOM

Date of Birth: 08/07/1974 Nationality: BRITISH

Occupation: **DIRECTOR**

Statement of Capital (Share Capital)

Class of shares	GBP A	lumber allotted ggregate nominal alue	6 6
Currency		mount paid mount unpaid	1 0
Prescribed particulars	RIGHT TO PARTICIPATE	IN A DISTRIBUT	DINARY SHARE WITH THE ION OF DIVIDENDS VOTED OUT JPON WINDING UP OF THE

Statem	ent of Capit	al (Totals)		
Currency	GBP	Total number of shares	6	
		Total aggregate nominal value	6	

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 23/10/2009 or that had ceased to be shareholders since the made up date of the previous Annual Return

A full list of shareholders for a private or non-traded public company are shown below

Shareholding 1:

2 ORDINARY Shares held as at 23/10/2009

Name: JASON DARREL PHELPS

Address:

Shareholding 2:	2 ORDINARY Shares held as at 23/10/2009
Name:	LISA MARIE PHELPS
Address:	
Shareholding 3:	2 ORDINARY Shares held as at 23/10/2009
Name:	MAEVE PHELPS
Address:	

Presenter information				
Contact Name:				
Address:				
Anthonigation				
Authorisation Authenticated				
This form was authorised by one of the following:				
Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager, Judicial Facto				