



Annual Return

Company Name: **COMMUNITY AND VOLUNTARY PARTNERS**

Company Number: **06278215**



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Company Name: **COMMUNITY AND VOLUNTARY PARTNERS**

Company Number: **06278215**

Date of this return: **13/06/2016**

Sic Codes: **94990**

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

Situation of  
Registered Office: **THE TANGENT BUSINESS HUB THE TANGENT BUSINESS CENTRE  
WEIGHBRIDGE ROAD SHIREBROOK MANSFIELD  
NG20 8RX**

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## Officers of the company

### Company Secretary 1

Type: **Person**  
Full Forename(s): **MS LORNA**  
Surname: **WALLACE**  
Service Address: **49 LANSDOWNE ROAD CHESTERFIELD BRIMINGTON  
S43 1BA**

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### Company Director 1

Type: **Person**  
Full Forename(s): **MS SHARON**  
Surname: **CHALLANDS**  
Service Address: **24 CHESTERFIELD ROAD CHESTERFIELD STAVELEY  
ENGLAND S43 3XD**

Country/State **ENGLAND**  
Usually Resident:  
Date of Birth: **\*\*/12/1967** Nationality: **BRITISH**  
Occupation: **CO-ORDINATOR**

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### Company Director 2

Type: **Person**  
Full Forename(s): **MR JONATHAN**  
Surname: **DAWSON**  
Service Address: **56 BARRY ROAD CHESTERFIELD BRIMINGTON  
ENGLAND S43 1PX**

Country/State **ENGLAND**  
Usually Resident:  
Date of Birth: **\*\*/11/1959** Nationality: **BRITISH**  
Occupation: **MANAGER**

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## Company Director 3

Type: **Person**  
Full Forename(s): **MR JAMES PHILIP**  
Surname: **JACKSON**  
Service Address: **1 WESTBRIDGE ROAD CHESTERFIELD BARLBOROUGH  
ENGLAND S43 4JA**

Country/State **ENGLAND**

Usually Resident:

Date of Birth: **\*\*/10/1974**

Nationality: **BRITISH**

Occupation: **CONSULTANT**

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## Company Director 4

Type: **Person**  
Full Forename(s): **MRS CORINNE DANIELLE YVONNE**  
Surname: **JESSON**  
Service Address: **30 STEAD STREET SHEFFIELD ECKINGTON  
S21 4FY**

Country/State **UNITED KINGDOM**

Usually Resident:

Date of Birth: **\*\*/11/1955**

Nationality: **BRITISH**

Occupation: **DEPUTY  
MANAGER**

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## Company Director 5

Type: **Person**  
Full Forename(s): **MRS HELEN NORAH**  
Surname: **LIDGETT**  
Service Address: **7 MAIN STREET ALFRETON NEWTON  
DE55 5TE**

Country/State **ENGLAND**

Usually Resident:

Date of Birth: **\*\*/02/1944**

Nationality: **BRITISH**

Occupation: **MANAGER**

## Company Director 6

Type: **Person**  
Full Forename(s): **MR GEORGE ROLLO**  
Surname: **O'NEIL**  
Service Address: **40 CASTLE LANE CHESTERFIELD BOLSOVER**  
**ENGLAND S44 6PS**

Country/State **UNITED KINGDOM**  
Usually Resident:  
Date of Birth: **\*\*/08/1946** Nationality: **SCOTTISH**  
Occupation: **COUNSELLOR**

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## Company Director 7

Type: **Person**  
Full Forename(s): **MS JENNIE**  
Surname: **STREET**  
Service Address: **16 THE GROVE SHEFFIELD**  
**ENGLAND S17 4AS**

Country/State **ENGLAND**  
Usually Resident:  
Date of Birth: **\*\*/01/1951** Nationality: **BRITISH**  
Occupation: **MANAGING**  
**DIRECTOR**

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## Company Director 8

Type: **Person**  
Full Forename(s): **DOROTHY GWENDOLINE**  
Surname: **WILLENS**  
Service Address: **GREEN FARM 8 ALFRETON ROAD ALFRETON NEWTON**  
**DE55 5TP**

Country/State **UNITED KINGDOM**  
Usually Resident:  
Date of Birth: **\*\*/10/1943** Nationality: **BRITISH**  
Occupation: **RETIRED**

# Authorisation

Authenticated

This form was authorised by one of the following:

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

