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Please complete in typescript, or in

## **Annual Return**

old black capitals.		, 11111 da 1 1 1 0 1 d 1 1 1
HFP000		
c	ompany number	06345223
Company name in full		ABERTON LIMITED
Date of this return		Day       Month       Year         □       <
		Day Month Year
Date of next return	n	
If you wish to make you earlier than the annivers please show that date h House will then send a tappropriate time.	sary of this return iere. Companies	
Registered Office Show here the address this return		EUROPEAN HOWE  47 COWBREDGE ROAD
Any change of	Post town	PONTYCLUN
registered office must be notified on form 287	County/Region	MES GLAMORGAN
	UK Postcode	CETIL L9 WIS
Principal busines	s activities	
Show trade classification the principal activity or a	on code number(s) for activities	L
NESDAY		



\*PRH41G8Q\*

30/12/2009 PC5 COMPANIES HOUSE

A SHELLER HISHER HICH SIZE BIII 1921 \*AOJBUFJW\*

108 05/12/2009 **COMPANIES HOUSE** 

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Vhen you have completed and signed the form please send it to the

Registrar of Companies at: Companies House, Crown Way, Cardiff, CF14 3UZ for companies registered in England or Wales

or LP-4 Edinburgh 2

DX 33050 Cardiff

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX ED235 Edinburgh 1 For companies registered in Scotland

Register of members			
If the register of members is not kept at the registered office, state here where it is kept			
registered onice, state nere where it is kept			
Post town			
Post town			
County/Region			
UK Postcode			
5333 55355 53			
B. L. C. B.L. William			
Register of Debenture holders If there is a register of debenture holders, or a			
duplicate of any such register or part of it, which			
is not kept at the registered office, state here where it is kept			
Post town			
County/Region			
UK Postcode			
Company type			
Public limited company			
Private company limited by shares			
Private company limited by guarantee witho share capital	put		
Private company limited by shares exempt u	under Please tick the appropriate box		
section 30			
Private company limited by guarantee exem	npt		
under section 30			
Private unlimited company with share capita	ā! <u> </u>		
Private unlimited company without share ca	pital		
	·		
Company Secretary	Details of a new company secretary must be notified on form 288a		
* Voluntary details (Please photocopy Name *Style/Title	I		
this area to provide			
details of joint secretaries).	ANNE ELIZABETH		
†† Tick the box if the Surname	R45map		
service address for the beneficiary of a Address ††	A BASSETS FIELD		
Confidentiality Order granted under section 723B of the Companies	THORNHILL		
Act 1985. Otherwise,	L CA02-166		
give your usual Post town residential address. In	CARDICE		
the case of a corporation or Scottish firm, give the County/Region	gion South GLAMORGAN		
registered or principal office address. UK Postcode	10 17 11 14 19 14 16		
If a partnership, give the names and addresses of Country	WALES		
the partners or the name			
of the partnership and office address	·		
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Directors Please list the directors * Voluntary details	in alphabetical order	Details of new directors must be notified on form 288a
In the case of a director that is a corporation or a	Name *Style/Title	L_MZ
Scottish firm, the name is the		Day Month Year
corporate or firm name	Date of birth	12 5/101/11 19 17 13
	Forename(s)	ANDREW JOHN
†† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companie Act 1985. Otherwise, give your usual residential address. In the case of a	Surname	KNEGHT
	e Address ††	A BASSETS FRELD
		THORNHELL
	s Post town	CARDIFF
	County/Region	SOUTH GLAMORGAN
corporation or Scottis firm, give the register or principal office	n <sup>ed</sup> UK Postcode	CIFLIA 19146
address.	Country	UALKS
	Nationality	BRITISH
	Business occupation	DERECTOR
Directors Please list the directors * Voluntary details	in alphabetical order	Details of new directors must be notified on form 288a
In the case of a director that is a corporation or a	Name *Style/Title	<u> </u>
Scottish firm, the		Day Month Year
name is the corporate or firm name	Date of birth	
	Forename(s)	
†† Tick the box if the	Surname	
address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual residential address. In the case of a corporation or Scottisl firm, give the registere or principal office address.	e Address ††	
	Post town	
	County/Region	
	uK Postcode	
	Country	
	Nationality	
	Business occupation	

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Class (e.g. Ordinary/Preference)	Number of shares issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)	
ORDINARY	ONE	<u> </u>	
Totals	one_	<u> </u>	
Please tick this box if your company was a traded public company at any time during the period of this return			
t of past and present Please tick the appropriate box below: On paper attached schedule where appropriate)			
A full list of shareholders for a private or non-traded public company is enclosed. Please complete Schedule A.			
A list of shareholders holding at least 5% of the issued shares of any share class for a traded public company is enclosed. Please complete Schedule B. st was not ne last two			
A list containing shareholder changes is enclosed			
→ For private or non-traded public companies, please complete Schedule A			
→ For traded public companies, please complete Schedule B			
There were no shareholder	changes in this period		
I certify that the information given in this return is true to the best of my knowledge and belief			
Mugh		Date 3/12/09	
*(director / secretary)  This return includes  (	continuation sheets	•	
DX number	DX exchange	Page 4	
	Totals  Please tick this box if your opublic company at any time this return  Please tick the appropriate of company is enclosed. Please of any share class for enclosed. Please complete of a list containing shareholder.  A list containing shareholder.  A list containing shareholder.  For private or non-tracomplete of Schedule.  For traded public cornected of Schedule.  There were no shareholder.  I certify that the information knowledge and belief.  *(director / secretary)  This return includes.	Ordinary/Preference)  Issued  ORDINARY  Please tick this box if your company was a traded public company at any time during the period of this return  Please tick the appropriate box below:  A full list of shareholders for a private or non-traded pucompany is enclosed. Please complete Schedule A.  A list of shareholders holding at least 5% of the issued shares of any share class for a traded public company enclosed. Please complete Schedule B.  A list containing shareholder changes is enclosed  For private or non-traded public companies, ple complete Schedule A  For traded public companies, please complete Schedule B  There were no shareholder changes in this period  I certify that the information given in this return is true knowledge and belief  "(director / secretary)  This return includes  continuation sheets  (enter number)	

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This must only be completed by private and public limited companies that have not traded on a regulated market

## Schedule A for private or non-traded public companies List of past and present shareholders

Company number	06245223	(Please use a continuation sheet if required)
Company name in full	ABERTON	LIMITED
	1	

- > Changes to shareholders' particulars or details of the amount of stock or shares transferred must be completed each year
- > You must provide a "full list" of all company shareholders on:
  - The company's first annual return following incorporation
  - Every third annual return after a full list has been provided
- List the company shareholders in alphabetical order or provide an index
- List joint shareholders consecutively

Do not give shareholder address information

	Class and number of	Shares or amount of stock transferred (if appropriate)		
Shareholder's name only	shares or amount of stock held	Class and number of shares or amount of stock transferred	Date of registration of transfer	
Name				
A 1 KNEGHT	one ordinary		·	
Name				
Name				
Name				
Name				
Name				
Name				
Name				
Name				