Companies House
for the record

AR01 (ef)

Annual Return

Received for filing in Electronic Format on the: **30/03/2010**

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Company Name:	**AA TAXIS AND PRIVATE HIRE NORTHUMBERLAND LIMITED**
Company Number:	**06862730**
Date of this return:	**30/03/2010**
SIC codes:	**6022**
Company Type:	**Private company limited by shares**
Situation of Registered Office:	**16 BONDGATE WITHOUT ALNWICK NORTHUMBERLAND ME66 1PP**

Officers of the company

Company Secretary *1*

Type:	**Person**
Full forename(s):	**THOMAS**
Surname:	**MILLER**
Former names:	

Service Address: **90 TYELAW MEADOWS**
SHILBOTTLE
ALNWICK
NORTHUMBERLAND
ENGLAND
NE66 2JJ

Company Director *1*

Type: **Person**

Full forename(s): **MR STEVE**

Surname: **MILLER**

Former names:

Service Address: **90 TYELAW MEADOWS**
SHILBOTTLE
ALNWICK
NORTHUMBERLAND
ENGLAND
NE66 2JJ

Country/State Usually Resident: **ENGLAND**

Date of Birth: **1979-12-15** *Nationality:* **BRITISH**

Occupation: **DRIVER**

Statement of Capital (Share Capital)

Class of shares	**ORDINARY**	*Number allotted*	**2**
		Aggregate nominal value	**2**
Currency	**GBP**	*Amount paid per share*	**1**
		Amount unpaid per share	**0**
Prescribed particulars	**FULL RIGHTS ATTACHED**		

Statement of Capital (Totals)

Currency	**GBP**	*Total number of shares*	**2**
		Total aggregate nominal value	**2**

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 30/03/2010 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 30/03/2010

Name: **STEVE MILLER**

Address:

Shareholding : *2*

0 ORDINARY Shares held as at 30/03/2010
1 DISPOSED OF IN PERIOD ON 31/01/2010

Name: **THOMAS MILLER**

Address:

Authorisation

Authenticated

This form was authorised by one of the following:

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