

Confirmation Statement

Company Name: ABBEYWOOD TOTS COMMUNITY NURSERIES LTD

Company Number: 06959168

Received for filing in Electronic Format on the: 20/07/2016

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Company Name: ABBEYWOOD TOTS COMMUNITY NURSERIES LTD

Company Number: 06959168

Confirmation 10/07/2016

Statement date:

Statement of Capital (Share Capital)

Class of Shares: ORDINARY Number allotted 4

Currency: GBP Aggregate nominal value: 4

Prescribed particulars

ALL SHARES ISSUED ARE FULLY PAID AND RANK EQUALLY IN TERMS OF 1.VOTING RIGHTS 2.THE RIGHT TO RECEIVE DIVIDENDS 3.THE RIGHTS TO A DISTRIBUTION UPON WINDING UP

| Statement of Capital (Totals) | | | | | | | |
|-------------------------------|-----|-------------------------|---|--|--|--|--|
| Currency: | GBP | Total number of shares: | 4 | | | | |
| | | Total aggregate nominal | 4 | | | | |
| | | value: | | | | | |
| | | Total aggregate amount | 0 | | | | |
| | | unpaid: | | | | | |

Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became 10/07/2016 registrable:

Name: MR MICHAEL GERALD WILLIAMS

Service address recorded as Company's registered office

Country/State Usually

ENGLAND

Resident:

Date of Birth: **/04/1964

Nationality: BRITISH

Nature of control

Notification Details

Date that person became 10/07/2016 registrable:

Name: MRS LISA WILLIAMS

Service address recorded as Company's registered office

Country/State Usually

ENGLAND

Resident:

Date of Birth: **/05/1968

Nationality: BRITISH

Nature of control

Notification Details

Date that person became 10/07/2016 registrable:

Name: MR IAN GEORGE FRY

Service address recorded as Company's registered office

Country/State Usually

ENGLAND

Resident:

Date of Birth: **/01/1966

Nationality: BRITISH

Nature of control

Notification Details

Date that person became 10/07/2016 registrable:

Name: MRS AMANDA MARIE FRY

Service address recorded as Company's registered office

Country/State Usually

ENGLAND

Resident:

Date of Birth: **/12/1966

Nationality: BRITISH

Nature of control

Confirmation Statement

| Commination Statement | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|
| I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement | | | | | | | | | | |
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Authorisation

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This form was authorised by one of the following:

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