



Companies House
— for the record —

AR01 (ef)

Annual Return



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Received for filing in Electronic Format on the: **10/11/2011**

Company Name: **ACADEMY 4 SIGNS LIMITED**

Company Number: **07043725**

Date of this return: **15/10/2011**

SIC codes: **18129**

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

Situation of Registered Office: **C/O C/O ABACUS 42 LIMITED
8 BONHAMS CLOSE
HOLYBOURNE
ALTON
HAMPSHIRE
ENGLAND**

Officers of the company

Company Secretary 1

Type: **Person**

Full forename(s): **DEREK**

Surname: **CONELEY**

Former names:

Service Address recorded as Company's registered office

Company Director 1

Type: **Person**
Full forename(s): **MR DEREK**

Surname: **CONELEY**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **15/05/1964** Nationality: **BRITISH**

Occupation: **NONE**

Company Director 2

Type: **Person**
Full forename(s): **MR COLIN WADE**

Surname: **POLEY**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **07/05/1952** Nationality: **BRITISH**

Occupation: **DIRECTOR**

Statement of Capital (Share Capital)

Class of shares	ORDINARY	<i>Number allotted</i>	100
		<i>Aggregate nominal value</i>	100
<i>Currency</i>	GBP	<i>Amount paid per share</i>	1
		<i>Amount unpaid per share</i>	0
<i>Prescribed particulars</i>			
ORDINARY EQUITY SHARES			

Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	100
		<i>Total aggregate nominal value</i>	100

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 15/10/2011 or that had ceased to be shareholders since the made up date of the previous Annual Return

A full list of shareholders for the company are shown below

Shareholding 1 : **50 ORDINARY shares held as at the date of this return**
Name: **DEREK CONELEY**

Shareholding 2 : **50 ORDINARY shares held as at the date of this return**
Name: **COLIN WADE POLEY**

Authorisation

Authenticated

This form was authorised by one of the following:

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