



Companies House
— for the record —

AR01 (ef)

Annual Return



Received for filing in Electronic Format on the: **30/11/2011**

XHCTHZON

Company Name: **CORNWALL AIR AMBULANCE TRUST**

Company Number: **07085879**

Date of this return: **24/11/2011**

SIC codes: **82990**

Company Type: **Private company limited by guarantee exempt under section 60**

Situation of Registered Office: **VICTORIA SQUARE ROCHE
ST AUSTELL
CORNWALL
ENGLAND
PL26 8LQ**

Officers of the company

Company Director 1

Type: **Person**
Full forename(s): **ANDREW MULLION BARWICK**

Surname: **BELL**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **AUSTRALIAN**

Date of Birth: **29/08/1934** Nationality: **BRITISH**

Occupation: **NONE**

Company Director 2

Type: **Person**
Full forename(s): **IAN**

Surname: **BRACKENBURY**

Former names:

Service Address recorded as Company's registered office

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

Date of Birth: **28/08/1945** Nationality: **BRITISH**

Occupation: **NONE**

Company Director **3**

Type: **Person**
Full forename(s): **HAROLD**

Surname: **CHAPMAN**

Former names:

Service Address: **VICTORIA SQUARE ROCHE
ST. AUSTELL
CORNWALL
PL26 8LQ**

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

Date of Birth: **22/03/1947** *Nationality:* **BRITISH**
Occupation: **RETIRED**

Company Director **4**

Type: **Person**
Full forename(s): **PAMELA**

Surname: **CHAPMAN**

Former names:

Service Address: **WHIMBREL WHITECROSS
WADEBRIDGE
CORNWALL
PL27 7JB**

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

Date of Birth: **26/08/1949** *Nationality:* **BRITISH**
Occupation: **RETIRED**

Company Director **5**

Type: **Person**

Full forename(s): **MR JOSEPH FRANCIS**

Surname: **JACQUES**

Former names:

Service Address: **VICTORIA COTTAGE ROCHE
ST. AUSTELL
CORNWALL
PL26 8LQ**

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

Date of Birth: **14/05/1949**

Nationality: **BRITISH**

Occupation: **RETIRED**

Company Director **6**

Type: **Person**
Full forename(s): **ALISTER**

Surname: **PILLING**

Former names:

Service Address: **VICTORIA SQUARE ROCHE
ST. AUSTELL
CORNWALL
PL26 8LQ**

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

Date of Birth: **17/10/1963** *Nationality:* **BRITISH**
Occupation: **SOLICITOR**

Authorisation

Authenticated

This form was authorised by one of the following:

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