



Companies House

AR01 (ef)

Annual Return



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Company Name: **EXCELLENCE PROPERTY MANAGEMENT LIMITED**

Company Number: **07321740**

Date of this return: **21/07/2015**

SIC codes: **99999**

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

Situation of Registered Office: **C/O C/O COLLINS CHAPPLE & CO. LTD.
34A MUSTERS ROAD
WEST BRIDGFORD
NOTTINGHAM
NG2 7PL**

Single Alternative Inspection Location (SAIL)

The address for an alternative location to the company's registered office for the inspection of registers is:

C/O COLLINS CHAPPLE & CO. LTD.
34A MUSTERS ROAD
WEST BRIDGFORD
NOTTINGHAM
UNITED KINGDOM
NG2 7PL

The following records have moved to the single alternative inspection location:

Register of members (section 114)
Register of directors (section 162)
Register of secretaries (section 275)
Records of resolutions and meetings (section 358)

Officers of the company

Company Director **1**

Type: **Person**
Full forename(s): **MRS KAYLEIGH MARIE**

Surname: **WELLS**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: **12/08/1988** *Nationality:* **BRITISH**

Occupation: **DIRECTOR**

Statement of Capital (Share Capital)

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

Prescribed particulars

THE SHARES HAVE ATTACHED TO THEM FULL VOTING, DIVIDEND AND CAPITAL DISTRIBUTION, INCLUDING ON WINDING UP, RIGHTS AND ARE NOT REDEEMABLE.

Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	1
		<i>Total aggregate nominal value</i>	1

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 21/07/2015 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 : **1 ORDINARY shares held as at the date of this return**
Name: **KAYLEIGH MARIE WELLS**

Authorisation

Authenticated

This form was authorised by one of the following:

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