Companies House

AR01 (ef)

Annual Return

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Company Name:	**DEESIDE BED CENTRE LTD**
Company Number:	**08047807**
Date of this return:	**26/04/2016**
SIC codes:	**47599**
Company Type:	**Private company limited by shares**
Situation of Registered Office:	**DEESIDE BED CENTRE CHESTER ROAD WEST** **QUEENSFERRY** **DEESIDE** **FLINTSHIRE** **CH5 1SA**

Officers of the company

Company Director 1

Type: **Person**

Full forename(s): **MR PETER CLIFFORD**

Surname: **ELSON**

Former names:

Service Address: **DEESIDE BED CENTRE CHESTER ROAD WEST**
QUEENSFERRY
DEESIDE
FLINTSHIRE
UNITED KINGDOM
CH5 1SA

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

Date of Birth: ****/02/1969** *Nationality:* **BRITISH**

Occupation: **NONE**

Statement of Capital (Share Capital)

Class of shares	**ORDINARY**	*Number allotted*	**1**
		Aggregate nominal value	**1**
Currency	**GBP**	*Amount paid per share*	**0**
		Amount unpaid per share	**1**

Prescribed particulars

FULL RIGHTS TO RECEIVE NOTICE OF, ATTEND AND VOTE AT GENERAL MEETINGS. ONE SHARE CARRIES ONE VOTE, AND FULL RIGHTS TO DIVIDENDS AND CAPITAL DISTRIBUTIONS (INCLUDING UPON WINDING UP).

Statement of Capital (Totals)

Currency	**GBP**	*Total number of shares*	**1**
		Total aggregate nominal value	**1**

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 26/04/2016 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: **PETER CLIFFORD ELSON**

Authorisation

Authenticated

This form was authorised by one of the following:

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