



Companies House

**AR01** (ef)

**Annual Return**



Received for filing in Electronic Format on the: **23/05/2016**

**X57L5UXM**

*Company Name:* **MUMS AID MATERNAL MENTAL HEALTH SUPPORT C.I.C.**

*Company Number:* **08062980**

*Date of this return:* **09/05/2016**

*SIC codes:* **86900**

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

*Situation of Registered Office:* **184-186 WESTCOMBE HILL  
LONDON  
SE3 7DH**

**Officers of the company**

*Company Director*    **1**

*Type:*                      **Person**

*Full forename(s):*        **DAWN**

*Surname:*                **BROWN**

*Former names:*

*Service Address recorded as Company's registered office*

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

*Date of Birth:*    **\*\*/09/1966**

*Nationality:*    **BRITISH**

*Occupation:*    **CHARITY MANAGER**

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*Company Director* 2

*Type:* **Person**

*Full forename(s):* **MERCY**

*Surname:* **BROWNE**

*Former names:*

*Service Address:* **44 HALSTOW ROAD  
GREENWICH  
LONDON  
SE10 0LD**

*Country/State Usually Resident:* **ENGLAND**

*Date of Birth:* **\*\*/06/1955**

*Nationality:* **BRITISH**

*Occupation:* **NONE**

*Company Director*    **3**

*Type:*                                **Person**

*Full forename(s):*                **MIRIAM**

*Surname:*                         **DONAGHY**

*Former names:*

*Service Address recorded as Company's registered office*

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

*Date of Birth:*    **\*\*/06/1962**

*Nationality:*    **IRISH**

*Occupation:*    **PSYCHOTHERAPIST**

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*Company Director* 4

*Type:* **Person**  
*Full forename(s):* EIMEAR MARY

*Surname:* MALLEN

*Former names:* MCMANUS

*Service Address:* 6 KIRKSIDE RD  
BLACKHEATH  
LONDON  
UNITED KINGDOM  
SE3 7SQ

*Country/State Usually Resident:* UNITED KINGDOM

*Date of Birth:* \*\*/04/1942      *Nationality:* IRISH  
*Occupation:* NONE

*Company Director*    **5**

*Type:*                                **Person**  
*Full forename(s):*                **JILL LESLEY**

*Surname:*                            **THOMPSON**

*Former names:*

*Service Address:*                **THE CANE CENTRE 80A LORDSHIP LANE  
LONDON  
LONDON  
UNITED KINGDOM  
SE22 8HF**

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

*Date of Birth:*    **\*\*/07/1957**                                *Nationality:*    **BRITISH**  
*Occupation:*    **NONE**

*Authorisation*

*Authenticated*

*This form was authorised by one of the following:*

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