



Companies House

AR01 (ef)

Annual Return



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Company Name: **BEN LANKESTER ORTHOPAEDICS LTD**

Company Number: **08360888**

Date of this return: **15/01/2015**

SIC codes: **86220**

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

Situation of Registered Office: **4 TANYARD
BROADWAY
ILMINSTER
SOMERSET
ENGLAND
TA19 9JT**

Officers of the company

Company Director 1

Type: **Person**
Full forename(s): **MR BENEDICT JAMES ARCHIBALD**

Surname: **LANKESTER**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: **16/05/1970** Nationality: **BRITISH**

Occupation: **ORTHOPAEDIC SPECIALIST**

Company Director 2

Type: **Person**
Full forename(s): **DR JACQUELINE LOUISE**

Surname: **SPURRIER**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: **24/10/1972** Nationality: **BRITISH**

Occupation: **DOCTOR**

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

Prescribed particulars

EACH SHARE IS ENTITLED TO ONE VOTE IN ANY CIRCUMSTANCES EACH SHARE IS ENTITLED PARI PASSU TO DIVIDEND PAYMENTS OR ANY OTHER DISTRIBUTION EACH SHARE IS ENTITLED PARI PASSU TO PARTICIPATE IN A DISTRIBUTION ARISING FROM A WINDING UP OF THE COMPANY

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 15/01/2015 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 : **51 ORDINARY shares held as at the date of this return**
Name: **BENEDICT JAMES ARCHIBALD LANKESTER**

Shareholding 2 : **49 ORDINARY shares held as at the date of this return**
Name: **JACQUELINE LOUISE SPURRIER**

Authorisation

Authenticated

This form was authorised by one of the following:

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