



Companies House

AR01 (ef)

Annual Return



Received for filing in Electronic Format on the: **05/02/2016**

X503CQZC

Company Name: **HEALTHWATCH REDBRIDGE**

Company Number: **08389279**

Date of this return: **05/02/2016**

SIC codes: **86900**

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

Situation of Registered Office: **HEALTHWATCH REDBRIDGE, 5TH FLOOR, FOREST HOUSE 16-20
CLEMENTS ROAD
ILFORD
ESSEX
IG1 1BA**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **CATHERINE MARGARET**

Surname: **TURLAND**

Former names:

Service Address: **REDBRIDGE LINK 5TH FLOOR FOREST HOUSE 16-20
CLEMENTS ROAD
ILFORD
ESSEX
IG1 1BA**

Company Director 1

Type: **Person**
Full forename(s): **MRS ATHENA REBECCA**

Surname: **DANIELS**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/11/1957** Nationality: **BRITISH**

Occupation: **HEALTH IMPROVEMENT
SPECIALIST**

Company Director 2

Type: **Person**

Full forename(s): **MR MOHAMMED**

Surname: **DEDAT**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/06/1962**

Nationality: **BRITISH**

Occupation: **ACCOUNTANT**

Company Director **3**

Type: **Person**

Full forename(s): **MS GLYNIS ANN**

Surname: **DONOVAN**

Former names:

Service Address: **REDBRIDGE LINK 5TH FLOOR FOREST HOUSE 16-20
CLEMENTS ROAD
ILFORD
ESSEX
IG1 1BA**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/01/1952** *Nationality:* **BRITISH**

Occupation: **DIRECTOR OF CARERS SUPPORT
SER**

Company Director 4

Type: **Person**
Full forename(s): **MICHAEL EDWARD**

Surname: **NEW**

Former names:

Service Address: **REDBRIDGE LINK 5TH FLOOR FOREST HOUSE 16-20
CLEMENTS ROAD
ILFORD
ESSEX
IG1 1BA**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/10/1943** *Nationality:* **BRITISH**
Occupation: **RETIRED**

Company Director **5**

Type: **Person**

Full forename(s): **MRS LORRAINE YVONNE**

Surname: **SILVER**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/06/1954**

Nationality: **BRITISH**

Occupation: **CAMPAIGNER**

Company Director 6

Type: **Person**
Full forename(s): **VANDA FIONA**

Surname: **THOMAS**

Former names:

Service Address: **REDBRIDGE LINK 5TH FLOOR FOREST HOUSE 16-20
CLEMENTS ROAD
ILFORD
ESSEX
IG1 1BA**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/07/1959** *Nationality:* **BRITISH**

Occupation: **EQUALITY DIVERSITY AND
INCLUSI**

Authorisation

Authenticated

This form was authorised by one of the following:

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