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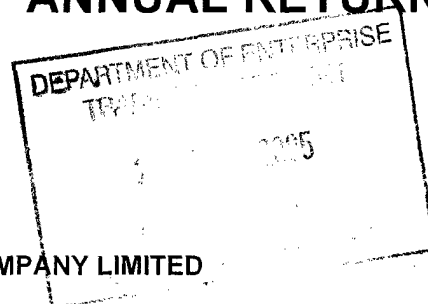
NY

BELFAST
BT1 3BS

Tel: 0845 604 88 88
Fax: 028 9090 5291
Email: info.companiesregistry@detini.gov.uk
Web: www.companiesregistry.detini.gov.uk

371s

ANNUAL RETURN



Company Number: **NI028724**

Company Name: **NEWRY HEALTH VILLAGE MANAGEMENT COMPANY LIMITED**

Company Type: **0 - NI PR LTD SH**

Date: **11 August 2005**

Please mark
appropriate box

There were no changes
in the period

☐

A list of changes is
enclosed

☐

A full list of members is
enclosed

☐

The information printed below is taken from Companies Registry records as at the date shown. If this information requires amendment use the spaces provided. Please read the notes for guidance before completing the return.

DATE OF THIS RETURN (See Note 1)

The information in this return should be made up to a date not later than

31/08/2005

DAY MONTH YEAR

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DATE OF NEXT RETURN

If you wish to make up your next return to a date earlier than the anniversary of this return please show the date here. Companies Registry will then send a form at the appropriate time.

DAY MONTH YEAR

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REGISTERED OFFICE (See Note 3)

This is the address registered by Companies Registry

**32A GREENAN ROAD
NEWRY
BT34 2PJ**

If the information shown needs amendment, give details below, and for secretary and director particulars, the date of any change.

PRINCIPAL BUSINESS ACTIVITIES
(See Note 4)

9600-RESIDENTS PROPERTY MANAGEMENT CO

LOCATION OF REGISTER OF MEMBERS (See Note 5)
This address must be in Northern Ireland

AT REGISTERED OFFICE ADDRESS

LOCATION OF REGISTER OF DEBENTURE HOLDERS
(See Note 6)
This address must be in Northern Ireland

Particulars of a new director or secretary
must be notified on form 296 (See Note 7)

Company Secretary
O'REILLY
DR DERVAL
32A GREENAN ROAD
NEWRY
NORTHERN IRELAND
BT34 2PJ

**If this person has ceased to be a secretary/
director, please state when.**

Particulars of a new director or secretary
must be notified on form 296 (See Note 7)

Director
DR JOHN COLIN
RADCLIFFE
36 GREENAN LOUGH ROAD
NEWRY
CO. DOWN
BT34 2PX

DATE OF BIRTH: 01/06/1964
NATIONALITY: BRITISH
OCCUPATION: MEDICAL PRACTITIONER

**If this person has ceased to be a secretary/
director, please state when.**

**Show any relevant current and previous
directorships.**

Director
DR RAYMOND
MCVERRY
8 CHERRY HILL
ROSTREVOR
NEWRY
CO. DOWN
BT34 3BD

DATE OF BIRTH: 20/10/1956
NATIONALITY: BRITISH
OCCUPATION: MEDICAL PRACTITIONER

**If this person has ceased to be a secretary/
director, please state when.**

**Show any relevant current and previous
directorships.**

Director
DR JOHN
DIGNEY
GREENWOOD GABLES
GREENAN ROAD
NEWRY
CO. DOWN
BT34 2PJ

DATE OF BIRTH: 21/11/1956
NATIONALITY: IRISH
OCCUPATION: MEDICAL PRACTITIONER

If this person has ceased to be a secretary/
director, please state when.

Show any relevant current and previous
directorships.

Director
DR IAN CHARLES
HENRY
36 DRUMSESK ROAD
ROSTREVOR
CO. DOWN
BT34 3EG

DATE OF BIRTH: 25/02/1949
NATIONALITY: IRISH
OCCUPATION: GENERAL PRACTITIONER

If this person has ceased to be a secretary/
director, please state when.

Show any relevant current and previous
directorships.

SHARE CAPITAL (See Note 8)

Enter details of all shares in issue at the date of this return.

Nominal Capital 41,580.00
Paid Up Capital 41,580.00

CLASS NUMBER AGGREGATE
VALUE

Ord 41580 41580

(The above details are those currently held on our records)

TOTALS

LIST OF PAST AND PRESENT MEMBERS

(See Note 9)

(Use attached schedule and additional sheets where appropriate) A full list is required if one was not included with either of the last two returns.

ELECTIVE RESOLUTIONS (See Note 10)

(Private companies only)

If an elective resolution is in force at the date of this return to dispense with annual general meetings, mark the box.

☐

If an elective resolution is in force at the date of this return to dispense with laying accounts in general meetings, mark the box.

☐

CERTIFICATE

I certify that the information given in this return is true to the best of my knowledge and belief.

SIGNED

[Signature]

Secretary/Director
(delete as appropriate)

DATE

31/8/05

Cheques should be made payable to the Department of Enterprise, Trade and Investment (DETI)

This return includes
Continuation sheets

To whom should Companies Registry direct any enquiries about the information shown in this return?

Registered office

Tel _____ Ext _____

SCHEDULE TO FORM 371s

COMPANY NUMBER: NI028724

COMPANY NAME: NEWRY HEALTH VILLAGE MANAGEMENT COMPANY LIMITED

LIST OF PAST AND PRESENT MEMBERS

	Account of Shares			
	Number of shares or amount of stock held by existing members at date of this return	Particulars of shares transferred since date of last return, or, in the case of the first return, since the incorporation of the company, by (a) persons who are still members (b) persons who have ceased to be members		Remarks
NAME AND ADDRESS		Number	Date of registration of transfer	

SCHEDULE TO FORM 371s

LIST OF PAST AND PRESENT MEMBERS

	Account of Shares			Remarks
	Number of shares or amount of stock held by existing members at date of this return	Particulars of shares transferred since date of last return, or, in the case of the first return, since the incorporation of the company, by (a) persons who are still members (b) persons who have ceased to be members		
NAME AND ADDRESS		Number	Date of registration of transfer	