



Companies House

**AR01** (ef)

**Annual Return**



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*Company Name:* **ANDREW COLLISON LIMITED**

*Company Number:* **04605497**

*Date of this return:* **31/01/2015**

*SIC codes:* **93120**

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

*Situation of Registered Office:* **20 THE STREET  
ALBURGH  
HARLESTON  
NORFOLK  
IP20 0DF**

**Officers of the company**

## *Company Secretary 1*

*Type:* **Person**  
*Full forename(s):* **AMANDA LEE**

*Surname:* **COLLISON**

*Former names:*

*Service Address:* **12 JENKINSONS PIGHTLE  
BEDINGHAM  
BUNGAY  
NORFOLK  
NR35 2DS**

*Company Director*    **1**

*Type:*                                **Person**

*Full forename(s):*                **ANDREW RALPH**

*Surname:*                         **COLLISON**

*Former names:*

*Service Address:*                **12 JENKINSONS PIGHTLE  
BEDINGHAM  
BUNGAY  
NORFOLKK  
NR35 2DS**

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

*Date of Birth:*    **05/06/1969**                                *Nationality:*    **BRITISH**

*Occupation:*    **GOLF PROFESSIONAL**

## Statement of Capital (Share Capital)

<b>Class of shares</b>	<b>ORDINARY</b>	<i>Number allotted</i>	<b>100</b>
		<i>Aggregate nominal value</i>	<b>100</b>
<i>Currency</i>	<b>GBP</b>	<i>Amount paid per share</i>	<b>1</b>
		<i>Amount unpaid per share</i>	<b>0</b>

### *Prescribed particulars*

EACH SHARE IS ENTITLED TO ONE VOTE IN ANY CIRCUMSTANCES.

## Statement of Capital (Totals)

<i>Currency</i>	<b>GBP</b>	<i>Total number of shares</i>	<b>100</b>
		<i>Total aggregate nominal value</i>	<b>100</b>

### *Full Details of Shareholders*

The details below relate to individuals / corporate bodies that were shareholders as at 31/01/2015 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* : 50 ORDINARY shares held as at the date of this return  
*Name:* ANDREW RALPH COLLISON

*Shareholding 2* : 50 ORDINARY shares held as at the date of this return  
*Name:* AMANDA LEE COLLISON

### *Authorisation*

*Authenticated*

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

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