



Companies House

AR01 (ef)

Annual Return



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Company Name: **ACRE WOOD DAY NURSERY LIMITED**

Company Number: **06393625**

Date of this return: **09/10/2014**

SIC codes: **85100**

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

Situation of Registered Office: **COBBLE STONES, ST. JOHNS PARK
MENSTON
ILKLEY
LS29 6ES**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **MR TIMOTHY JAMES**

Surname: **SADLER**

Former names:

Service Address: **COBBLE STONES
ST. JOHNS PARK, MENSTON
ILKLEY
LS29 6ES**

Company Director ***1***

Type: **Person**

Full forename(s): **MRS MAXINE FRANCES**

Surname: **SADLER**

Former names:

Service Address: **COBBLE STONES
ST. JOHNS PARK, MENSTON
ILKLEY
LS29 6ES**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **10/02/1969** *Nationality:* **BRITISH**

Occupation: **NURSERY MANAGER**

Company Director **2**

Type: **Person**

Full forename(s): **MR TIMOTHY JAMES**

Surname: **SADLER**

Former names:

Service Address: **COBBLE STONES
ST. JOHNS PARK, MENSTON
ILKLEY
LS29 6ES**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **26/02/1964** *Nationality:* **BRITISH**

Occupation: **PRODUCT MANAGER**

Statement of Capital (Share Capital)

Class of shares	ORDINARY	<i>Number allotted</i>	2
		<i>Aggregate nominal value</i>	2
<i>Currency</i>	GBP	<i>Amount paid per share</i>	0
		<i>Amount unpaid per share</i>	0

Prescribed particulars

7. THE LIEN CONFERRED BY REGULATION 8 IN TABLE A SHALL ATTACH ALSO TO FULLY PAID-UP SHARES, AND THE COMPANY SHALL ALSO HAVE A FIRST AND PARAMOUNT LIEN ON ALL SHARES, WHETHER FULLY PAID OR NOT, STANDING REGISTERED IN THE NAME OF ANY PERSON INDEBTED OR UNDER LIABILITY TO THE COMPANY, WHETHER HE SHALL BE THE SOLE REGISTERED HOLDER THEREOF OR SHALL BE ONE OF TWO OR MORE JOINT HOLDERS, FOR ALL MONEYS PRESENTLY PAYABLE BY HIM OR HIS ESTATE TO THE COMPANY. REGULATION 8 IN TABLE A SHALL BE MODIFIED ACCORDINGLY. 8. THE LIABILITY OF ANY MEMBER IN DEFAULT IN RESPECT OF A CALL SHALL BE INCREASED BY THE ADDITION AT THE END OF THE FIRST SENTENCE OF REGULATION 18 IN TABLE A OF THE WORDS ??AND ALL EXPENSES THAT MAY HAVE BEEN INCURRED BY THE COMPANY BY REASON OF SUCH NON-PAYMENT.

Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	2
		<i>Total aggregate nominal value</i>	2

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 09/10/2014 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 : **1 ORDINARY shares held as at the date of this return**
Name: **TIM SADLER**

Shareholding 2 : **1 ORDINARY shares held as at the date of this return**
Name: **MAXINE SADLER**

Authorisation

Authenticated

This form was authorised by one of the following:

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