



Companies House

**AR01** (ef)

**Annual Return**



Received for filing in Electronic Format on the: **07/05/2015**

**X46WKQI0**

*Company Name:* **ALBERT STREET COMMUNITY CENTRE LIMITED**

*Company Number:* **NI036145**

*Date of this return:* **07/05/2015**

*SIC codes:* **86900**

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

*Situation of Registered Office:* **106 ALBERT STREET  
BELFAST  
BT12 4HL**

**Officers of the company**

*Company Director* 1

Type: **Person**  
Full forename(s): **MS BRENDA**

Surname: **CONNOLLY**

Former names:

*Service Address recorded as Company's registered office*

*Country/State Usually Resident:* **NORTHERN IRELAND**

*Date of Birth:* **02/04/1948** *Nationality:* **IRISH**

*Occupation:* **RETIRED DIRECTOR OF  
NURSING**

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*Company Director* 2

Type: **Person**  
Full forename(s): **MR GERARD**

Surname: **FUSCO**

Former names:

*Service Address recorded as Company's registered office*

*Country/State Usually Resident:* **NORTHERN IRELAND**

*Date of Birth:* **24/08/1958** *Nationality:* **IRISH**

*Occupation:* **PART-TIME YOUTH WORKER**

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*Company Director*    **3**

Type:                                **Person**  
Full forename(s):                **MR FRANCIS**

Surname:                                **MCCANN**

Former names:

*Service Address recorded as Company's registered office*

*Country/State Usually Resident:*    **NORTHERN IRELAND**

*Date of Birth:*    **19/06/1953**                                *Nationality:*    **IRISH**

*Occupation:*    **MLA**

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*Company Director*    **4**

Type:                                **Person**  
Full forename(s):                **MR MICHAEL TERENCE**

Surname:                                **NICKLE**

Former names:

*Service Address recorded as Company's registered office*

*Country/State Usually Resident:*    **NORTHERN IRELAND**

*Date of Birth:*    **26/04/1945**                                *Nationality:*    **NORTHERN IRISH**

*Occupation:*    **COUNSELLOR**

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*Company Director*    **5**

Type:                                **Person**  
Full forename(s):                **MR DANNY**

Surname:                           **POWER**

Former names:

*Service Address recorded as Company's registered office*

*Country/State Usually Resident:*   **NORTHERN IRELAND**

*Date of Birth:*   **10/01/1965**                                *Nationality:*   **N IRISH**

*Occupation:*     **CENTRE MANAGER**

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*Company Director*    **6**

Type:                                **Person**  
Full forename(s):                **MR THOMAS**

Surname:                           **ROCKS**

Former names:

*Service Address recorded as Company's registered office*

*Country/State Usually Resident:*   **NORTHERN IRELAND**

*Date of Birth:*   **25/10/1961**                                *Nationality:*   **IRISH**

*Occupation:*     **RECREATION OFFICER**

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*Company Director* 7

*Type:* **Person**

*Full forename(s):* MR MARTIN JOHN

*Surname:* VOYLE

*Former names:*

*Service Address recorded as Company's registered office*

*Country/State Usually Resident:* NORTHERN IRELAND

*Date of Birth:* 04/06/1963

*Nationality:* IRISH

*Occupation:* NEIGHBOURHOOD WARDEN

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### *Authorisation*

*Authenticated*

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

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