Companies House

AR01 (ef)

Annual Return

Received for filing in Electronic Format on the: **11/08/2015**

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Company Name:	**OPTIMUM CARE (NW) LIMITED**
Company Number:	**09161015**
Date of this return:	**05/08/2015**
SIC codes:	**87900**
Company Type:	**Private company limited by shares**
Situation of Registered Office:	**133 CLOCK FACE ROAD CLOCK FACE** **ST. HELENS** **MERSEYSIDE** **UNITED KINGDOM** **WA9 4LF**

Officers of the company

Company Director 1

Type: **Person**

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

Surname: **BICKERSTAFFE**

Former names:

Service Address: **133 CLOCK FACE ROAD CLOCK FACE**
ST. HELENS
MERSEYSIDE
UNITED KINGDOM
WA9 4LF

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

Date of Birth: **17/04/1984** *Nationality:* **BRITISH**

Occupation: **DIRECTOR**

Company Director 2

Type: **Person**

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

Surname: **HASLAM**

Former names:

Service Address: **133 CLOCK FACE ROAD CLOCK FACE**
ST. HELENS
MERSEYSIDE
UNITED KINGDOM
WA9 4LF

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

Date of Birth: **06/08/1980** *Nationality:* **BRITISH**

Occupation: **DIRECTOR**

Statement of Capital (Share Capital)

Class of shares	**ORDINARY**	*Number allotted*	**2**
		Aggregate nominal value	**2**
Currency	**GBP**	*Amount paid per share*	**0**
		Amount unpaid per share	**1**

Prescribed particulars

ORDINARY SHARE WITH FULL VOTING RIGHTS, ENTITLED TO RECEIVE DIVIDENDS AND DISTRIBUTIONS UNDER ALL CIRCUMSTANCES

Statement of Capital (Totals)

Currency	**GBP**	*Total number of shares*	**2**
		Total aggregate nominal value	**2**

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 05/08/2015 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 : **1 ORDINARY shares held as at the date of this return**
Name: **MICHAEL HASLAM**

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

Authorisation

Authenticated

This form was authorised by one of the following:

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