



Companies House

AR01 (ef)

Annual Return



Received for filing in Electronic Format on the: **11/10/2015**

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Company Name: **UNMANNED SURVEY SOLUTIONS LIMITED**

Company Number: **09217573**

Date of this return: **15/09/2015**

SIC codes: **74909**

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

Situation of Registered Office: **13 HOMEFIELD PARK
BODMIN
CORNWALL
UNITED KINGDOM
PL31 1DJ**

Officers of the company

Company Director **1**

Type: **Person**
Full forename(s): **SHELLEY ANN**

Surname: **DAVIDSON**

Former names:

Service Address: **13 HOMEFIELD PARK**
 BODMIN
 CORNWALL
 UNITED KINGDOM
 PL31 1DJ

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

Date of Birth: ****/11/1972** *Nationality:* **BRITISH**
Occupation: **ACCOUNTANT**

Statement of Capital (Share Capital)

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

Prescribed particulars

THE ORDINARY SHARES WILL HAVE FULL RIGHTS IN THE COMPANY WITH REGARD TO VOTING, DIVIDEND AND CAPITAL DISTRIBUTION. A DIVIDEND MAY BE PAID IN RESPECT OF THIS CLASS OF SHARE TO THE EXCLUSION OF ANY OTHER CLASS OF SHARE CURRENTLY IN ISSUE. WHERE A DIVIDEND IS DECLARED IN RESPECT OF ALL CLASSES OF SHARE THE COMPANY MAY, BY ORDINARY RESOLUTION, DIFFERENTIATE BETWEEN THIS AND ANY OR ALL OTHER CLASSES AS TO THE AMOUNT OR PERCENTAGE OF DIVIDEND PAYABLE, BUT BY DEFAULT THE SHARES IN THIS CLASS SHALL BE DEEMED TO RANK PARI PASSU WITH ANY OTHER SHARE CLASS CURRENTLY IN ISSUE, UNLESS THE RIGHTS ATTACHED TO SUCH OTHER CLASS SPECIFY OTHERWISE.

Statement of Capital (Totals)

<i>Currency</i>	GBP	<i>Total number of shares</i>	1
		<i>Total aggregate nominal value</i>	1

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 15/09/2015 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: **SHELLEY DAVIDSON**

Authorisation

Authenticated

This form was authorised by one of the following:

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