



Companies House

AR01 (ef)

Annual Return



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X3YI68PC

Company Name: NATIONAL BACK PAIN ASSOCIATION

Company Number: 00936855

Date of this return: 14/12/2014

SIC codes: 94120

Company Type: Private company limited by guarantee

Situation of Registered Office: 16 ELMTREE ROAD
TEDDINGTON
MIDDLESEX
TW11 8ST

Officers of the company

Company Director **1**

Type: **Person**

Full forename(s): **MR EDWARD CHARLES**

Surname: **BARNES**

Former names:

Service Address: **9 GLEN CLOSE
KINGSWOOD
TADWORTH
SURREY
ENGLAND
KT20 6NT**

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

Date of Birth: **23/04/1948** *Nationality:* **BRITISH**

Occupation: **COMPANY DIRECTOR**

Company Director 2

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

Surname: **EMBER**

Former names:

Service Address: **SUITE 203, 2ND FLOOR EMBLEM HOUSE
LONDON BRIDGE HOSPITAL, 27 TOOLEY STREET
LONDON
ENGLAND
SE1 2PR**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **12/01/1972** *Nationality:* **BRITISH**

Occupation: **CONSULTANT AND
ORTHOPAEDIC SURGEON**

Company Director **3**

Type: **Person**

Full forename(s): **PROF JEREMY CHARLES THOMAS**

Surname: **FAIRBANK**

Former names:

Service Address: **ST LUKES LATIMER ROAD
HEADINGTON
OXFORD
ENGLAND
OX3 7PF**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **14/05/1948** *Nationality:* **BRITISH**

Occupation: **ORTHOPAEDIC SPINE SURGEON**

Company Director **4**

Type: **Person**
Full forename(s): **DR ALAN DAVID HYDE**

Surname: **GARDNER**

Former names:

Service Address: **1 HYDE LANE
DANBURY
CHELMSFORD
ESSEX
CM3 4QX**

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

Date of Birth: **03/03/1939** *Nationality:* **BRITISH**
Occupation: **SURGEON**

Company Director **5**

Type: **Person**

Full forename(s): **MR ASHLEY JOHN**

Surname: **GREENSLADE**

Former names:

Service Address: **145 BURDON LANE
CHEAM
SUTTON
SURREY
ENGLAND
SM2 7DB**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **12/04/1958** *Nationality:* **BRITISH**

Occupation: **CONSULTANT**

Company Director **6**

Type: **Person**

Full forename(s): **BRIAN ROBERT**

Surname: **HAMMOND**

Former names:

Service Address: **1 THE CAUSEWAY
SUTTON
SURREY
SM2 5RS**

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

Date of Birth: **28/05/1953** *Nationality:* **IRISH**

Occupation: **CHIROPRACTOR**

Company Director 7

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

Surname: **HYMAN**

Former names:

Service Address recorded as Company's registered office

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

Date of Birth: **11/08/1975** *Nationality:* **BRITISH**

Occupation: **OSTEOPATH**

Company Director 8

Type: **Person**

Full forename(s): **ELIZABETH ANNE**

Surname: **PROSSER**

Former names:

Service Address: **3 CROXDEN CLOSE
EDGWARE
MIDDLESEX
HA8 5PS**

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

Date of Birth: **23/01/1956** *Nationality:* **BRITISH**

Occupation: **INDEPENDENT CONSULTANT**

Company Director 9

Type: **Person**
Full forename(s): **DR LISA CAROL**

Surname: **ROBERTS**

Former names: **SMITH**

Service Address: **8 LUCAS CLOSE
ROWNHAMS
SOUTHAMPTON
SO16 8JD**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **21/05/1967** *Nationality:* **BRITISH**

Occupation: **LECTURER PHYSIOTHERAPIST**

Company Director 10

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

Surname: THOMSON

Former names:

Service Address: 31 SYON PARK GARDENS
OSTERLEY
ISLEWORTH
MIDDLESEX
TW7 5NE

Country/State Usually Resident: UNITED KINGDOM

Date of Birth: 22/05/1938 Nationality: BRITISH
Occupation: HEAD OF SCHOOL
PHYSIOTHERAPY

Authorisation

Authenticated

This form was authorised by one of the following:

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