



Companies House

— for the record —

Company Name

**MOUNT SHILOH HEALTH
ADVISORY CENTRE**

363s Annual Return

Company Type

**Private Company Limited By
Guarantee Exempt Under Sect 30**

Company Number

3570590

Information extracted from
Companies House records on
2nd May 2004

- > Please check the details printed in blue on this statement.
- > If any details are wrong, strike them through and write the correct details in the "Amended details" column.
- > Please use black pen and write in c



Section 1: Company details

Ref: 3570590/15/42

	Current details	Amended details																																
> Registered Office Address <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Shiloh House Hickman Avenue East Park Wolverhampton West Midlands WV1 2BS	Address _____ _____ _____ UK Postcode _ _ _ _ _																																
> Register of Members <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Address where the Register is held At Registered Office	Address _____ _____ _____ UK Postcode _ _ _ _ _																																
> Register of Debenture Holders <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	Not Applicable	Address _____ _____ _____ UK Postcode _ _ _ _ _																																
> Principal Business Activities <i>If any of the details are wrong, strike them through and fill in the correct details in the "Amended details" column.</i>	<table border="1"> <thead> <tr> <th>SIC Code</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>8514</td> <td>Other human health activities</td> </tr> <tr> <td>9304</td> <td>Physical well-being activities</td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	SIC Code	Description	8514	Other human health activities	9304	Physical well-being activities											<table border="1"> <thead> <tr> <th>SIC CODE</th> <th>Description</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	SIC CODE	Description														
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> Please enter additional principal activity code(s) in "Amended details" column. See notes for guidance for list of activity codes.																																		

Section 2: Details of Officers of the Company

	Current details	Amended details
> Company Secretary <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Company Secretary must be notified on form 288a.</i>	Name Lorna Patricia ALLEN Address 47 Thorneycroft Lane Fallings Park Wolverhampton West Midlands WV10 0NF	Name <input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Address UK Postcode _ _ _ _ _ Date of change _ _ / _ _ / _ _ _ _ Date Lorna Patricia ALLEN ceased to be secretary (if applicable) _ _ / _ _ / _ _ _ _
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288a.</i>	Name Lorna Patricia ALLEN Address 47 Thorneycroft Lane Fallings Park Wolverhampton West Midlands WV10 0NF Date of birth 20/07/1967 Nationality British Occupation Secretary	Name <input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Address UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Lorna Patricia ALLEN ceased to be director (if applicable) _ _ / _ _ / _ _ _ _

	Current details	Amended details
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288a.</i>	Name Donald BROWN Address 8 Laburnum Road Stow Heath Wolverhampton West Midlands WV1 2TH Date of birth 19/05/1956 Nationality British Occupation Fabricator	Name <hr/> <input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Address <hr/> <hr/> <hr/> UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation <u>Project Co-ordinator</u> Date of change _ _ / _ _ / _ _ _ _ Date Donald BROWN ceased to be director (if applicable) _ _ / _ _ / _ _ _ _
> Director <i>If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.</i> <i>Particulars of a new Director must be notified on form 288a.</i>	Name Janice DAVIDSON Address 21 Filey Road Oxley Wolverhampton West Midlands WV10 6ST Date of birth 11/11/1957 Nationality British Occupation Theatre Nurse	Name <hr/> <input type="checkbox"/> Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Address <hr/> <hr/> <hr/> UK Postcode _ _ _ _ _ Date of birth _ _ / _ _ / _ _ _ _ Nationality _____ Occupation _____ Date of change _ _ / _ _ / _ _ _ _ Date Janice DAVIDSON ceased to be director (if applicable) _ _ / _ _ / _ _ _ _

Amended details

If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.

Particulars of a new Director
must be notified on form
288a.

Address
53 Norbury Road
Fallings Park
Wolverhampton
West Midlands
WV10 9BN

Date of birth 23/07/1966

Nationality British

Occupation Midwife

Name _____

☐ Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.

Address

UK Postcode _ _ _ _ _

Date of birth / /

Nationality _____

Occupation _____

Date of change / /

Date Ruth Emily FRANCIS ceased to be director (if applicable)

— — — — —

If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.

Particulars of a new Director
must be notified on form
288a

Name
Lloyd Anthony HUDSON-SMITH

Address
18 Brynmawr Road
Lanesfield
Wolverhampton
West Midlands
WV14 9BU

Date of birth 04/05/1963

Nationality **British**

Occupation **Community
Psychiatric Nurse**

Name _____

☐ Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.

Address

UK Postcode _ _ _ _ _

Date of birth _ _ / _ _ / _ _ _ _

Nationality _____

Occupation _____

Date of change / /

Date Lloyd Anthony HUDSON-SMITH
ceased to be director (if applicable)

5 5 / 5 5 / 5 5 5 5

> **Director**

If any of the details for this person are wrong, strike them through and fill in the correct details in the "Amended details" column.

Particulars of a new Director must be notified on form 288a.

Current details

Name
Naomi LEAR

Address
444 Willenhall Road
Willenhall
West Midlands
WS10 9DU

Date of birth 15/10/1963

Nationality British

Occupation Project Manager

Amended details

Name

☐ Tick this box if this address is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985.

Address

UK Postcode _ _ _ _ _

Date of birth _ _ / _ _ / _ _ _ _

Nationality _____

Occupation _____

Date of change _ _ / _ _ / _ _ _ _

Date Naomi LEAR ceased to be director (if applicable)

_ _ / _ _ / _ _ _ _



Companies House

— for the record —

363s Annual Return Declaration

- > When you have checked all the sections of this form, please complete this page and sign the declaration below.
- > If you want to change the made up date of this annual return, please complete 2 below.

1. Declaration

- ☒ I confirm that the details in this annual return are correct as at the made-up-date (shown at 2 below). I enclose the filing fee of £15.

Signature

(Director / Secretary)

Date

_ _ / _ _ / _ _ _ _

*This date must not be earlier than the
return date at 2 below*

What to do now

*Complete this page then send the whole of the Annual Return and the
declaration to the address shown at 4 below.*

2. Date of this return

- ☐ This AR is made up to **27/5/2004** If you are making this return up to an earlier date, please give the date here

_ _ / _ _ / _ _ _ _

Note: The form must be delivered to CH within 28 days of this date

3. Date of next return

- ☐ If you wish to change your next return to a date earlier than **27th May 2005** please give the new date here:

_ _ / _ _ / _ _ _ _

4. Where to send this form

- ☐ Please return this form to:

Registrar of Companies
Companies House
Crown Way
Cardiff CF14 3UZ

OR

For members of the Hays Document
Exchange service
DX 33050 Cardiff

*Have you enclosed the filing fee with the company number written on the
reverse of the cheque?*

Contact Address

You do not have to give any contact information below, but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you give will be visible to searchers of the public record.

Contact Name

Telephone number *inc code*

Address

DX number *if applicable*

DX exchange

Postcode

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