



Companies House

AR01 (ef)

Annual Return



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X42HGJEI

Company Name: **NEWBRIDGE INTEGRATED COLLEGE LIMITED**

Company Number: **NI028197**

Date of this return: **25/02/2015**

SIC codes: **85310**

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

Situation of Registered Office: **25 DONARD VIEW ROAD
LOUGHBRICKLAND
BANBRIDGE
CO.DOWN
BT32 3LN**

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **MR JOHN CIARAN**

Surname: **O'HARE**

Former names:

Service Address recorded as Company's registered office

Company Director 1

Type: **Person**
Full forename(s): **MR PAUL CHRISTOPHER**

Surname: **CAMPBELL**

Former names:

Service Address recorded as Company's registered office

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

Date of Birth: **20/04/1947** Nationality: **BRITISH**
Occupation: **GRAPHIC**

Company Director **2**

Type: **Person**
Full forename(s): **MRS NORAH**

Surname: **CONNOLLY**

Former names:

Service Address recorded as Company's registered office

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

Date of Birth: **16/07/1955** *Nationality:* **IRISH**

Occupation: **HOUSEWIFE**

Company Director **3**

Type: **Person**
Full forename(s): **MR PHILIP REUBEN**

Surname: **MEHAFFEY**

Former names:

Service Address recorded as Company's registered office

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

Date of Birth: **02/06/1953** *Nationality:* **BRITISH**

Occupation: **CIVIL ENGINEER**

Company Director 4

Type: **Person**
Full forename(s): **MR JOHN CIARAN**

Surname: **OHARE**

Former names:

Service Address recorded as Company's registered office

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

Date of Birth: **16/09/1955** Nationality: **BRITISH**

Occupation: **TEACHER**

Authorisation

Authenticated

This form was authorised by one of the following:

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