

Please complete in typescript, or in bold black capitals.

CHFP010

**Company Number** 

**Company Name in full** 

Nativest £15 010793 363a

**Annual Return** 

3804633				<u></u>	
QUALITY	SERVICE	STANDARDS	LIMITED		

**Date of this return** (See note 1)

The information in this return is made up to

**Date of next return** (See note 2)
If you wish to make your next return to a date earlier then the anniversary of this return please show the date here.
Companies House will then send a form at the appropriate time.

Registered Office (See note 3)
Show here the address at the date of this return.

Any changes of registered office **must** be notified on form 287.

Post town

County / Region

Postcode

D	ay	Мо	nth		Yε	ar	
0	9	0	7	2	0	0	0

Day	Month	Year

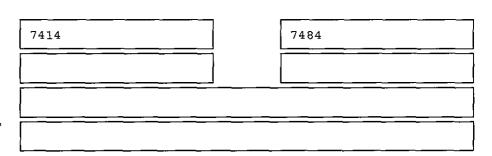
SPECTRUM	HOUSE,	20/26	CURSITOR	STREET		
LONDON						
EC4A 1HY						

## Principal business activities

(See note 4,

Show trade classification code number(s) for the principal activity or activities.

If the code number cannot be determined, give a brief description of principal activity.





COMPANIES HOUSE

0400 26/07/00 When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF4 3UZ

DX 33050 Cardiff

for companies registered in England and Wales

or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh

Register of members If the register of members		· 			
not kept at the registered office, state here where it	is				
kept.	Post town				
	County / Region	Postco	ode		
	·				
Register of Debentus (See note 6)	re holders				
If there is a register of debenture holders and it is	s not				
kept at the registered offic state where it is kept.					
cours where was nop	County / Region	Postco	ode		
Company type (See	e note 7)	<u></u>			
Public limited company	,				
•	 				
Private company limited by shares  Private company limited by guarantee without share capital		X			
Private company limited by shares exempt under section 30		Please mark the appropriate the propriate in the propriat	riate box		
Private company limited by guarantee exempt under section 30					
Private unlimited company capital	with share				
Private unlimited company capital	without share				
Сарна					
		Details of a new company secretary must b	e notified on form 2882		
Company Secretary Name	(See notes 1-5)  * Style / Title	* Honours etc			
(Please photocopy	·				
this area to provide details of joint	Forename(s)	MICHAEL JAMES			
secretaries).	Surname	HARLOW			
* Voluntary details. Prev	rious forename(s)				
Pre	vious surname(s)				
Addres	ss	89 HILLVIEW ROAD, HATCH END			
Usual residential addres must be given. In the	s				
case of a corporation, give the registered or	Post town	PINNER			
principal office address.	County / Region	MIDDLESEX Postc	ode		
	Country				
coact	,		Page 2		
Company Secretarial and Compliance Software					

Directors (See notes 1-8 Please list directors in alphabe		Details of new directors must be no	otified on for	m 288a		
Name	* Style / Title		Day	Month Year		
	* Honours etc	D	ate of 2 5	0 8 1 9 4 6		
	Forename(s)	DAVID JOHN				
	Surname	TRENCHARD				
Prev	rious forename(s)		·			
Pre	vious surname(s)					
Addres	ss	16 WILFRED ROAD, BOSCOMBE				
Usual residential address must be given. In the	s					
case of a corporation, give the registered or	Post town	BOURNEMOUTH				
principal office address.	County / Region	DORSET	Postcode	BH5 1ND		
	Country		Nationality	BRITISH		
Busi	ness occupation	COMPANY DIRECTOR				
Oth	er directorships	See attached schedule				
* Voluntary details.						
Name	* Style / Title	Day Month Year				
	* Honours etc	D	ate of 1 2	2 1 1 1 9 5 6		
	Forename(s)	JOHN				
	Surname	LUXFORD				
Prev	vious forename(s)					
Pre	vious surname(s)					
Addres	ss	6 LIMES ROAD				
Usual residential address must be given. In the	ss					
case of a corporation, give the registered or	Post town	WEYBRIDGE				
principal office address.	County / Region	SURREY	Postcode			
	Country	KT13 8DH	Nationality	BRITISH		
Busi	ness occupation	COMPANY DIRECTOR				
Oth	ner directorships	None				
Coact						
Company Secretarial and Compliance Software				Page 3		

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Please list directors in alphab		Details of new directors must b	e notified on for	m 288a		
Name			Day	Month Year		
	* Honours etc		Date of Birth	0 4 1 9 4 3		
	Forename(s)	NICHOLAS LANCASTER				
	Surname	BRACKIN				
Pre	evious forename(s)			/		
Pr	evious surname(s)					
Addre	ess	6 THE WILLOWS				
Usual residential addre	ss					
must be given. In the case of a corporation, post town give the registered or		HITCHEY				
principal office address.	County / Region	HERTS	Postcode	SG4 9EB		
	Country		Nationality	BRITISH		
Bus	iness occupation	FIELD OFFICER				
Other directorships		None				
* Voluntary details.						
Name	* Style / Title		Day	Month Year		
	* Honours etc		Date of Birth			
	Forename(s)					
	Surname					
Pre	evious forename(s)					
Pr	evious surname(s)					
Addre	ess					
Usual residential addre	ess					
case of a corporation, give the registered or	Post town					
principal office address.	County / Region		Postcode			
	Country		Nationality			
Bus	iness occupation					
Of	ther directorships					
Coast						
Company Secretarial and				Page 4		
Compliance Software						

issued share capital (See note 9) Enter details of all the shares in issue at the date of this return.	Class e.g. Ordinary/Preference)	Number of iss shares	(i n	Aggregate Nominal Value i.e. Number of shares issued nuttiplied by nominal value per hare)
ORDINARY			2	2.00
	Totals			2.00
List of past and present members (use attached schedule where appropriate) A full list is required if one was not included with either of the last two	S There were no change	·	on paper	in another format
returns. (See note 10)	A list of changes is en		on paper	in another format
	A full list of members	is enclosed	Х	
Elective Resolutions (Private companies only) (See note 11)	If at the date of this	annual general med return an election is	etings, <i>ma</i> in force to	ork this box dispense
Certificate	I certify that the info		-	
Signed	Master		Date	19 lozloo.
† Please delete as appropriate.	† <del>a director</del> / secretary			
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House.	This return in	cludes 2 (enter numb		itinuation sheets.
Please give the name, address, telephone number and, if available, a DX number and		ECTRUM HOUSE,	20-26 CU	JRSITOR STREET,
Exchange of the person Companies House should contact if there is any query.	LONDON, EC4A 1H	<u> </u>		
		Tel		

DX number DX 458

DX exchange LONDON



Please complete in typescript, or in bold black capitals.

CHFP010

**Company Number** 

Company Name in full

## List of past and present members Schedule to form 363a, 363b

3804633				
QUALITY	SERVICE	STANDARDS	LIMITED	

Class

(e.g. Ordinary / Preference)

ORDINARY

Number of shares or amount of stock held by existing members at date of this return. Particulars of shares or stock transferred since the date of the last return (or in the case of the first return, since the incorporation of the company) by

(a) persons who are still members, and

(b) persons who have ceased to be members.

	(b) persons who have ceased to be members.				
Name and address	Number or amount currently held	Number or amount Transferred	Date of registration of transfer	Remarks	
THE BRITISH ASSOCIATION OF REMOVERS LIMITED 3 CHURCHILL COURT, 58 STATION ROAD, NORTH HARROW, MIDDLESEX, HA2 7SA	2				
KI LEGAL SERVICES LIMITED SPECTRUM HOUSE, 20/26 CURSITOR STREET, LONDON, EC4A 1HY	o	1	05/09/1999	,	
KI SECRETARIAL SERVICES LIMITED SPECTRUM HOUSE, 20/26 CURSITOR STREET, LONDON, EC4A 1HY	O	1	05/08/1999		



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Compan

## List of other directorships Schedule to form 363a

Company Number	3804633
Company Name in full	QUALITY SERVICE STANDARDS LIMITED
Name	DAVID JOHN TRENCHARD

Company Name	Resignation
BRITISH ASSOCIATION OF REMOVERS (SERVICES) LIMITED	