



**Companies House**  
— for the record —

**AR01** (ef)

**Annual Return**



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**X2KJ6C17**

*Company Name:* **SURVIVORS OF TRAUMA LIMITED**

*Company Number:* **NI033133**

*Date of this return:* **22/10/2013**

*SIC codes:* **86900**

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

*Situation of Registered Office:* **SURVIVORS OF TRAUMA  
151 CLIFTONVILLE ROAD  
BELFAST  
BT14 6JR**

**Officers of the company**

## *Company Secretary 1*

*Type:* **Person**  
*Full forename(s):* **MR PATRICK**

*Surname:* **MURPHY**

*Former names:*

*Service Address:* **68 OLDPARK AVENUE  
BELFAST  
N. IRELAND  
BT14 6HH**

*Company Director*    ***1***

*Type:*                      **Person**

*Full forename(s):*        **MRS MARY**

*Surname:*                **BRADFORD**

*Former names:*

*Service Address:*        **20 BRAMBLEWOOD  
CRUMLIN  
BT29 4DG**

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

*Date of Birth:*    **12/05/1948**                      *Nationality:*    **IRISH**

*Occupation:*    **HOUSEWIFE**

*Company Director*    **2**

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

*Surname:*                                **FITZPATRICK**

*Former names:*

*Service Address:*                        **6 WOODLAND AVENUE**  
    **BELFAST**  
    **BT14 6BY**

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

*Date of Birth:*   **19/02/1971**                                *Nationality:*   **IRISH**  
*Occupation:*    **POSTAL WORKER**

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*Company Director*    **3**

*Type:*                                **Person**

*Full forename(s):*                **MR STEWART**

*Surname:*                            **JOSEPH**

*Former names:*

*Service Address:*                **7 SOMERTON CLOSE  
BELFAST**

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

*Date of Birth:*    **28/02/1954**                                *Nationality:*    **IRISH**

*Occupation:*    **BUILDER**

*Company Director*    **4**

*Type:*                      **Person**

*Full forename(s):*        **MR PAUL**

*Surname:*                **MAGUIRE**

*Former names:*

*Service Address:*        **1 THIRLMERE GDNS  
BELFAST  
CO ANTRIM  
BT15 5EF**

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

*Date of Birth:*    **18/06/1948**                      *Nationality:*    **IRISH**

*Occupation:*    **UNEMPLOYED**

*Company Director*    **5**

*Type:*                      **Person**

*Full forename(s):*        **MRS CATHERINE**

*Surname:*                **MCNALLY**

*Former names:*

*Service Address:*        **13 NORFOLK GARDENS  
BELFAST  
CO. ANTRIM  
N. IRELAND  
BT11 8DD**

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

*Date of Birth:*    **26/02/1945**                      *Nationality:*    **IRISH**

*Occupation:*    **HOUSEWIFE**

*Company Director*    **6**

*Type:*                            **Person**  
*Full forename(s):*            **MR PATRICK**

*Surname:*                      **MURPHY**

*Former names:*

*Service Address:*            **68 OLDPARK AVENUE**  
                                 **BELFAST**  
                                 **N. IRELAND**  
                                 **BT14 6HH**

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

*Date of Birth:*    **16/03/1961**                            *Nationality:*    **IRISH**  
*Occupation:*    **SCHOOL TEACHER**

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*Company Director* 7

*Type:* **Person**

*Full forename(s):* **MRS ANN**

*Surname:* **ROWAN**

*Former names:*

*Service Address recorded as Company's registered office*

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

*Date of Birth:* **24/04/1949**

*Nationality:* **IRISH**

*Occupation:* **RETIRED**

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### *Authorisation*

*Authenticated*

*This form was authorised by one of the following:*

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