



Companies House
— for the record —

AR01 (ef)

Annual Return



Received for filing in Electronic Format on the: 03/04/2013

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Company Name: VINE CENTRE LIMITED

Company Number: NI032293

Date of this return: 31/03/2013

SIC codes: 96090

Company Type: Private company limited by guarantee

Situation of Registered Office: THE VINE CENTRE 193 CRUMLIN ROAD
BELFAST
COUNTY ANTRIM
NORTHERN IRELAND
BT14 7AA

Officers of the company

Company Secretary 1

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

Surname: **MCILWRATH**

Former names:

Service Address recorded as Company's registered office

Company Director 1

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

Surname: **BEST**

Former names:

Service Address recorded as Company's registered office

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

Date of Birth: **29/01/1933** *Nationality:* **BRITISH**
Occupation: **RETIRED**

Company Director 2

Type: **Person**

Full forename(s): **MRS EVELYN WINIFRED**

Surname: **COLEMAN**

Former names:

Service Address recorded as Company's registered office

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

Date of Birth: **08/04/1937**

Nationality: **BRITISH**

Occupation: **RETIRED**

Company Director 3

Type: **Person**

Full forename(s): **REV JOHN SAMUEL BEATTIE**

Surname: **DRENNAN**

Former names:

Service Address: **92 NORTH CIRCULAR ROAD
BELFAST
CO ANTRIM
BT14 6TN**

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

Date of Birth: **29/12/1951** *Nationality:* **IRISH**

Occupation: **PRESBYTERIAN MINISTER**

Company Director 4

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

Surname: **IRWIN**

Former names:

Service Address: **25 SHANLIEVE PARK
BELFAST
ANTIRM
BT14 8JE**

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

Date of Birth: **12/08/1955** *Nationality:* **BRITISH**
Occupation: **HOME MAKER**

Company Director 5

Type: **Person**

Full forename(s): **BARBARA**

Surname: **MC ILWRATH**

Former names:

Service Address: **10 COOMBE HILL PARK
BELFAST
BT14 6PH**

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

Date of Birth: **10/06/1962** *Nationality:* **N.IRISH**

Occupation: **LECTURES IN PLAYWORK**

Company Director 6

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

Surname: **WILSON**

Former names:

Service Address recorded as Company's registered office

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

Date of Birth: **16/05/1934** *Nationality:* **BRITISH**

Occupation: **RETIRED**

Authorisation

Authenticated

This form was authorised by one of the following:

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