



# Please return to Ammual Return

REGISTRAR OF COMPANIES COMPANIES HOUSE CROWN WAY CARDIFF CF4 3UZ

of company number	CN	598338	Q
company name			
WALTER HESELWOOD	LIMITED		

This form should be completed in black.

## Date of this return (See note 1)

The information in this return should be made up to a date not later than

If you are making the return up to an earlier date please show the date here.

#### Date of next return (See note 2)

If you wish to make your next return to a date earlier than the anniversary of this return, please show the date here. Companies House will then send a form at the appropriate time.

Day Month Year	
DA 3  0 1  1 9  1	
, ,	
N.	
DB	

## Registered Office (See note 3)

This is the address registered by Companies House as at 07/11/91

STEVENSON RD SHEFFIELD S9 2SG

Use this space to notify a change	of registered office address.
RO	
Post Town	
County/Region	
Postcode	

# Principal business activities

(See note 4)

Show trade classification code number for principal activity or activities.

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

PA 8 3 2 2	

598338	5
Register of members (See note 5)  If the register of members is not kept at the registered office, state here where it is kept.	RM
	Post Town
	County/Region
	Postcode
Register of Debenture holders (See note 6)	RD
if there is a register of debenture holders and it is not kept at the registered office, state here where	
it is kept.	Post Town
	County/Region
Company type(See note 7)  Public limited company  Private company limited by shares .  Private company limited by guarantee without share capital  Private company limited by shares exempt under section 30  Private company limited by guarantee exempt under section 30  Private unlimited company with share capital	T1 T2 T3 T4 Please mark the appropriate box T5 T6 T7  Details of a new company secretary must be notified on form 288.  CS  GAIL FLIZ ABETII  TURNER
Previous forenames	
Previous surname	
Address	AD "HILL TO!"
Usual residential address must be given. In the case of a corporation, give the registered or principal office address.	Post Town 17/78SH LANE  County/Region DERBYSHIRE
* Voluntary details	Postcode S31 9RZ Country ENGLAND

	·		
598338	You may photocopy the page to provide details of additional directors.		
Directors (continued)	Details of new directors must be notified on form 288		
(See note 8)	<del> </del>		
Name • *Style/Title	CD .		
Forenames	GAIL ELIZABETH		
Surname	TURNER		
*Hönours etc			
Previous forenames			
Previous surname			
Address	AD HILLTOI		
Usual residential address must be given. In the case of a	MEST HANDLEY		
corporation, give the registered or principal office address.	Post Town MARSH LANK		
principal office address.	County/Region		
,	Postcode S31 9RZ Country ENGLAND		
Date of birth	Day Month Year  DO 016 111 516 Nationality NA BRITISH		
Business occupation	OC SECRETALY		
Other directorships	OD WALTER HESEL WOOO (INVESTMENT) LTD		
·			
Name *Style/Title	CD		
•			
Forenames Surname			
*Honours etc			
Previous forenames			
Previous surname			
Address	AD		
Usual residential address must be			
given. In the case of a corporation, give the registered or	Post Town		
principal office address.			
	County/Region		
	Postcode Country		
Date of birth	Day Month Year  DO		
Business occupation	ос		
Other directorships	ОД		
* Voluntary details			
- volumary details	1		

Continuation Sheet

598338 *	You may photocopy this page to provide details of additional directors.
Directors (continued)	Details of new directors must be notified on form 288
(See note 8)	1
Name *Style/Title	CD
Forenames	
Surname	
*Honours etc	
Previous forenames	
Previous surname	1 <del>-                                   </del>
Address	AD
Usual residential address must be	
given. In the case of a corporation, give the registered or	Post Town
principal office address.	County/Region
	Cov. Month Year
Date of birth	NA Nationality INA
Business occupation	
Other directorships	
Other directorships	
Name *Style/Title	
	e CD
Forename	s
Surnam	ne
Forename Surnam *Honours et Previous forename Previous surnam Address Usual residential address must be given. In the case of corporation, give the registered of principal office address.	
Previous forename	es
Previous surnan	ne
Address	AD
Usual residential address must be	De l
given. In the case of corporation, give the registered	a
principal office address.	1
	County/Region
	Postcode Country
Date of bit	Tth DO     Nationality NA
Business occupati	
Other directorshi	
50.54	
Voluntary details	Continuation She

598338	
Directors (See note 8)	Details of modifications and beneath to the con-
Please list directors in alphabeti order	Details of new directors must be notified on form 288
Name' ' ' *Styl	e/Title CD
Fore	enames WALTFA
St	IrnameHESELWOOD
*Hono	urs etc
Previous fore	enames
Previous su	rname
Address	AD THE BUNGALOW
Usual residential address mu	ust be PARK FARM
given. In the case of corporation, give the register principal office address.	, a
principal office audiess.	County/RegionSOUTH YORASHIAF
	Postcode S/8 5×19 Country ENGLAND
Date o	f birth DO OS 013 217 Nationality NA BRITISH
Business occu	wateriality [] voice//on
Other directo	
Other directo	ISINDS TOTAL PROJECTUCKIN TOVESTITENTS / XIII
	e/Title CD
Name *Style	
Name *Style	e/Title CD
Name *Style	names STEPHEN WALTER BYRON  Thame HESEL NOOD
Name *Style Forei	e/Title CD STEPHEN WALTER BYRON  rname HESEL NOOD
Name *Style Fore Sur	names STEPHEN WALTER BYRON  rname HESEL NOOD  ars etc  names
Name *Style Forei Sui *Honou	names STEPHEN WALTER BYRON  rname HESEL NOOD  ars etc  names
Name *Style Forei Sur *Honou Previous forei Previous sur Address Usual residential address mu	PAD WESTVILL HOUSE  STEPHEN WALTER BYRON  HESELNOOD  WESTVILL HOUSE  St be  30 CHESTERISIO RD
Name *Style Fore Sur *Honou Previous fore Previous sur Address Usual residential address mu given. In the case of corporation, give the registers	PAD WESTVILL HOUSE  st be a 30 CHESTERFIELD RD
Name *Style Fore Sur *Honou Previous fore Previous sur Address Usual residential address mu given. In the case of	PAD WESTVILL HOUSE  STEPHEN WALTER BYRON  HESTELNOOD  WESTVILL HOUSE  37 CHESTERFIELD RD
Name *Style Fore Sur *Honou Previous fore Previous sur Address Usual residential address mu given. In the case of corporation, give the registers	PATITILE CD  STEPHEN WALTER BYRON  HESTELNOOD  Instrume  AD  WESTVILL HOUSE  St be  a act or Post Town  ECKINGTON
Name *Style Fore Sur *Honou Previous fore Previous sur Address Usual residential address mu given. In the case of corporation, give the registers	STEPHEN WALTER BYKON  HESTEL NOOD  Thames  Thames  Thames  Thames  Thames  Thames  Thames  Thames  That is the finance of the state of
Name *Style Fore Sur *Honou Previous fore Previous sur Address Usual residential address mu given. In the case of corporation, give the registere principal office address.	Title CD  STEPHEN WALTER BYKON  HESEL NOOD  IT SET TO SET
Name *Style Fore Sur *Honou Previous fore Previous sur Address Usual residential address mu given. In the case of corporation, give the registers principal office address.  Date of	STEPHEN WALTER BYKON  HESTEL NOOD  Traine  AD  WESTVILL HOUSE  St be f a ed or  Post Town  County/Region  DERBTSHIRE  Postcode  S3/93B  Country  ENGLAND  Day Month Year  DO /   # O  L S  L  Nationality  NA BRITISH  Pation  OC  METAL MERCHANT

598338

			₩
Issued share capital (See note 9) Enter details of all the shares in	Class	Number	Aggregate Nominal Value
issue at the date of this return.		40,000	<u> </u>
•	Totals	40,000	£ 40,000
List of past and present members (See note 10) (Use attached schedule where appropriate)			Please mark the appropriate box(es) .
A full list is required if one was not included with either of the last two returns.	There were no changes in	·	on paper not on paper
The last full members list was at 03/11/89	A full list of members is enclosed not on paper not on page.  A full list of members is enclosed		
Elective resolutions			
(See note 11) (Private companies only)	If an election is in force a with annual general meeti		
•	If an election is in force a with laying accounts in ga		
Certificate		·····	
l certify that the information given in this return is true to the best of my knowledge and belief.	Signed	WALL	
i enclose the fee of £32.	Date 21/1	1/91	Sooretary/Director * (* delete as appropriate)
	This return includes (en	ONS contin	uation sheets.
To whom should Companies	,		
House direct any enquiries about the information shown in this	J, H. SCARLE Chartered Accou		
return?	3/d FLOOR NORWICH UNIO	DO FAIR DINGS	
	22 HIGH ST		
	SHEFFIELD, S1	265	Postcode
	Telephone 0742	722026	Extension
Check List har you included	- your principal business ac	tivity code?	

- dates of birth of all directors?
- a signature of either a director or secretary?
- a members list (if required)?

