

Please complete in typescript, or in bold black capitals.

Annual Return

CHFP000

Company number

02094574

Company name in full

NEIL YOUNG ASSOCIATES LIMITED

Day

Month

Year

Date of this return

The information in this return is made up to

3 11/11 12/12 10 10 8

Day

Month

Year

Date of next return

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

Registered Office

Show here the address at the date of this return

Any change of registered office must be notified on form 287

Post town

County/Region

CORNER HOUSE WESTLANDS GROVE

PORTCHESTER , FAREHAM

PORTSMOUTH

HAMPSHIRE

Registrar of Companies at:

UK Postcode

9 A B 0 6 L

Principal business activities

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 7440



A36

11/02/2009 COMPANIES HOUSE

Companies House, Crown Way, Cardiff, CF14 3UZ for companies registered in England or Wales Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX ED235 Edinburgh 1 For companies registered in Scotland

When you have completed and signed the form please send it to the

DX 33050 Cardiff

or LP-4 Edinburgh 2

Register of members If the register of members is no registered office, state here wh	t kept at the ere it is kept				
	Post town				
C	ounty/Region				
	UK Postcode				
Register of Debenture If there is a register of debentu duplicate of any such register of is not kept at the registered off	re holders, or a or part of it, which				
where it is kept	Post town				
c	County/Region				
	UK Postcode				
Company type					
Public limited company					
Private company limited	by shares	X			
Private company limited share capital	Private company limited by guarantee without share capital				
Private company limited section 30 Private company limited under section 30		<u></u>	Please tick the appropriate box		
Private unlimited compa	any with share cap	I			
Private unlimited compa	any without share	pital			
Company Secretary		Details of a new company see	cretary must be notified on form 288a		
* Voluntary details (Please photocopy Na	me *Style/Tit	MRS			
this area to provide details of joint secretaries).	Forename(
†† Tick the box if the	Surnam	Young			
address shown is a service address for the	Address 1		WESTLANDS GROVE,		
beneficiary of a Confidentiality Order granted under section	7,00,000		REHAM		
723B of the Companies Act 1985. Otherwise,					
give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.	Post tow				
	County/Region				
	UK Postcoo	P 0 11 6	A B		
If a partnership, give the names and addresses of the partners or the name of the partnership and	Count	ENGLAND			
office address					

Directors Please list the directors in alphabetical order * Voluntary details		Details of new directors must be notified on form 288a
corporation or a	Name *Style/Title	MR
Scottish firm, the name is the		Day Month Year
corporate or firm name	Date of birth	0 910 911 19 14 18
	Forename(s)	NEIL HEDLEY
†† Tick the box if the	Surname	Young
address shown is a service address for the	Address ††	CORNER HOUSE WESTLANDS GROVE
beneficiary of a Confidentiality Order granted under section		PORTCHESTER, FAREHAM
723B of the Companies Act 1985. Otherwise,	Post town	PORTSMOUTH
give your usual residential address. In the case of a	County/Region	
corporation or Scottish firm, give the registered or principal office		P 10 11 16 19 1A 18
address.	Country	ENGLAND
	Nationality	BRITISH
	Business occupation	MARKETING AND ADVERTISING
Directors Please list the directors i. * Voluntary details In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name †† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registere or principal office address.	Name *Style/Title Date of birth Forename(s) Surname Address †† Post town County/Region UK Postcode Country Nationality	Day Month Year

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Issue share capital Enter details of all the shares in issue at the date of this return	Class (e.g. Ordinary/Preference)	Number of shares issued	Aggregate Nominal Value (i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)
	ORDINARY	2	<u>£2</u>
	L	1	
		1	
	1	1	
	Totals	2	£2
Traded public companies A traded public company means a company any of whose shares are shares admitted to trading on a regulated market	Please tick this box if your coupublic company at any time this return		
List of past and present shareholders (use attached schedule where appropriate)	Please tick the appropriate b	oox below:	On paper In another format
Private or non-traded public companies are required to provide a "full list" if one was not included with either of the last two returns.	A full list of shareholders for a private or non-traded public company is enclosed. Please complete Schedule A.		
Traded public companies are required to provide a list of shareholders who held at least 5% of the issued shares of any share class if a list was not provided with either of the last two	A list of shareholders holding at least 5% of the issued shares of any share class for a traded public company is enclosed. Please complete Schedule B.		
returns.	A list containing shareholde	r changes is enclosed	
	→ For private or non-tra complete Schedule	ded public companies, pl e A	ease
	→ For traded public con Schedule B	npanies, please complete	•
	There were no shareholder	changes in this period	X
Certificate	I certify that the information knowledge and belief	given in this return is true	to the best of my
Signed	X NH	\sim	Date 6.0 L.09
*Please delete as appropriate When you have signed the return, send it with the fee to the Registrar of Companies. Make cheques payable to Companies House.		NIL continuation sheets	;
You do not have to give any contact		IL 20, - THE	ARMOURY
information in the box opposite but you do, it will help Companies House t contact you if there is a query on th	LUNIT RI FORT	WALLINGTON, M	ILLITARY ROAD
form. The contact information that you give will be visible to searchers of the	LEASIELIAM LIAM	MPSHIRE POIG 8	<u> </u>
public record.	DX number	DX exchange	
			Page 4

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corporation or a	n alphabetical order Name *Style/Title	Details of new directors must be notified on form 288a
Scottish firm, the name is the		Day Month Year
corporate or firm name		
	Forename(s)	
†† Tick the box if the address shown is a service address for the beneficiary of a	Surname	
	Address ††	
Confidentiality Order granted under section		
723B of the Companies Act 1985. Otherwise, give your usual	Post town	
residential address. In the case of a	County/Region	
corporation or Scottish firm, give the registered or principal office		
address.	Country	
	Nationality	
	Business occupation	
Directors Please list the directors * Voluntary details	in alphabetical order	Details of new directors must be notified on form 288a
In the case of a director that is a corporation or a	Name *Style/Title	
Scottish firm, the name is the		Day Month Year
corporate or firm name	Date of birth	
	Forename(s)	
†† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.	Surname	, [
	• Address ††	•
	County/Region	
	Country	/
	Nationality	<u></u>
Business occupation		

Directors Please list the directors in alphabetical order * Voluntary details In the case of a director that is a Name *Style/Title		Details of new directors must be notified on form 288a
corporation or a Scottish firm, the name is the	Name Styl	Day Month Year
corporate or firm name	Date o	f birth /
	Forena	nme(s)
†† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise,	Sur	rname [
	e Addre	ess ††
	8	t town
give your usual residential address. In the case of a	County/F	
corporation or Scottish firm, give the registered or principal office	h	stcode
address.	C	ountry
	Natio	onality
	Business occu	pation
Directors Please list the directors * Voluntary details	in alphabetical order	Details of new directors must be notified on form 288a
In the case of a director that is a corporation or a	Name *Sty	le/Title
Scottish firm, the name is the corporate or firm	Date o	
name	Foren	ame(s)
44 Tt-1: 4b - b - :: 16 4b - c	Su	ırname
†† Tick the box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985. Otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.		ress ††
	n []	
		st town
	County/	Region
	red UK Po	stcode
	C	Country
	Nati	ionality
	Business occu	upation

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