



**Companies House**  
— for the record —

**AR01** (ef)

**Annual Return**



X19VMMMJ

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*Company Name:* **GLENTHORN (SWANAGE) PROPERTY MANAGEMENT COMPANY LIMITED**

*Company Number:* **05115272**

*Date of this return:* **28/04/2012**

*SIC codes:* **98000**

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

*Situation of Registered Office:* **40 HIGH WEST STREET  
DORCHESTER  
DORSET  
UNITED KINGDOM  
DT1 1UR**

**Officers of the company**

## *Company Secretary 1*

*Type:* **Person**

*Full forename(s):* **JAMES**

*Surname:* **LAIRD**

*Former names:*

*Service Address:* **119 HILTINGBURY ROAD  
CHANDLERS FORD  
EASTLEIGH  
HAMPSHIRE  
SO53 5NP**

*Company Director*    **1**

*Type:*                                **Person**

*Full forename(s):*                **PETER STUART**

*Surname:*                         **GRIFFITHS**

*Former names:*

*Service Address:*                **20 JOINERS WAY  
GERRARDS CROSS  
BUCKINGHAMSHIRE  
SL9 0BK**

*Country/State Usually Resident:*    **UNITED KINGDOM**

*Date of Birth:*    **11/03/1959**                                *Nationality:*    **BRITISH**

*Occupation:*    **FITNESS INSTRUCTOR**

*Company Director*    **2**

*Type:*                      **Person**

*Full forename(s):*        **MR MICHAEL WILLIAM**

*Surname:*                **HARROP**

*Former names:*

*Service Address:*        **DAIMERS  
ROUGH HEIGHTS  
SWANAGE  
DORSET  
BH19 2EE**

*Country/State Usually Resident:*    **UNITED KINGDOM**

*Date of Birth:*    **02/10/1972**

*Nationality:*    **BRITISH**

*Occupation:*    **RETIRED**

*Company Director*    **3**

*Type:*                      **Person**

*Full forename(s):*        **ANTHONY**

*Surname:*                **KIPLING**

*Former names:*

*Service Address:*        **FLAT 3 GLENTHORNE  
15 ULWELL ROAD  
SWANAGE  
DORSET  
BH19 1LF**

*Country/State Usually Resident:*    **UNITED KINGDOM**

*Date of Birth:*    **31/03/1938**

*Nationality:*    **BRITISH**

*Occupation:*    **RETIRED**

*Company Director* 4

Type: **Person**  
Full forename(s): **MR GEOFFREY DENNIS**

Surname: **PORTER**

Former names:

Service Address: **28 STRATHFIELD ROAD  
ANDOVER  
HAMPSHIRE  
SP10 2HH**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **01/07/1948** Nationality: **BRITISH**  
Occupation: **NONE**

*Authorisation*

*Authenticated*

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

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