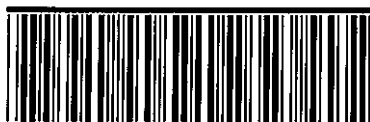




C O M P A N I E S H O U S E

THE REGISTRAR OF COMPANIES
COMPANIES HOUSE
CROWN WAY
CARDIFF
CF4 3UZ



A41 *A6NG6MCN* 264
COMPANIES HOUSE 12/06/96

LV3
000831
£18

363s

Annual Return

of company number 03055629

K

company name
FLY AWAY LIMITED

company type
PRIVATE COMPANY LIMITED BY SHARES

This form should be completed in black.

The information printed below is taken from Companies House records as at 20/04/96

If this information requires amendment use the spaces opposite.

Date of this return *(See note 1)*

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

Day	Month	Year
1 1	0 5	9 6

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

Day	Month	Year

Registered Office *(See note 3)*

This is the address registered by Companies House.

LYNNE HILL LANE EQUESTRIAN CTR
PENKRIDGE
STAFFORDSHIRE
ST19 5NT

.....
.....
.....
.....

Principal business activities *(See note 4)*

Please enter trade classification(s).

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If the code cannot be determined from the notes, give a brief description of principal activity.

EQUESTRIAN
SUPPLIES

03055629

Register of members (See note 5)

If the information shown needs amendment, give details below and, for secretary and director particulars, the date of any change.

The register is kept at

REGISTERED OFFICE

Register of debenture holders (See note 6)

Any register of debenture holders (or duplicate) is kept at

Company Secretary (See note 7)

Particulars of a new secretary **must** be notified on form 288.

GARRY
PARTRIDGE
EQUESTRIAN CENTRE LYNE HILL LANE
PENKRIDGE
STAFFORD
STAFFORDSHIRE ST19 5NT

Day Month Year
Date of any change.

If this person has ceased to be secretary, please state when.

Day Month Year
Date of resignation.

Directors (See note 7)

Particulars of a new director **must** be notified on form 288.

HELEN
DOLISZNYJ
EQUESTRIAN CENTRE LYNE HILL LANE
PENKRIDGE
STAFFORD
ST19 5NT

Day Month Year
Date of any change.

Date of Birth:- 01/07/58

Nat:BRITISH

Occ:DIRECTOR

If this person has ceased to be director, please state when.

Day Month Year
Date of resignation.

Show any relevant current and previous directorships.

If the information shown needs amendment,
give details below and the date of any change.

Directors - continued

Particulars.

Day	Month	Year

Date of any change.

NO MORE DIRECTORS — ADDITIONAL SECRETARIES
OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.

If this person has ceased to be director, please
state when.

Day	Month	Year

Date of resignation.

Show any relevant current and previous directorships.

Particulars.

Day	Month	Year

Date of any change.

NO MORE DIRECTORS — ADDITIONAL SECRETARIES
OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.

If this person has ceased to be director, please
state when.

Day	Month	Year

Date of resignation.

Show any relevant current and previous directorships.

Particulars.

Day	Month	Year

Date of any change.

NO MORE DIRECTORS — ADDITIONAL SECRETARIES
OR DIRECTORS MUST BE NOTIFIED ON FORM 288a.

WALSH WAY 110
25 BRIDGE STREET
QUEENS CHAMBERS
CERTIFIED ACCOUNTANTS
CUTLER LIFORD HALL

If this person has ceased to be director, please
state when.

Day	Month	Year

Date of resignation.

Show any relevant current and previous directorships.

Issued Share Capital (See note 8)

Enter details of all shares in issue at the date of this return.

Class (eg Ordinary/ Preference etc)	Number of shares issued	Aggregate nominal value (ie Number of shares issued multiplied by nominal value per share)
ORD		
Totals	2	£ 2

List of past and present members

(See note 9)

(Use attached schedule where appropriate)

Please mark the appropriate box.

A full list is required.

on paper ☐ not on paper ☐

A full list of members is enclosed

**Elective resolutions** (See note 10)

(Private companies only)

If an elective resolution is in force at the date of this return to dispense with annual general meetings, *mark this box.*

☐

If an elective resolution is in force at the date of this return to dispense with laying accounts in general meetings, *mark this box.*

☐**Certificate**

I certify that the information given in this return is true to the best of my knowledge and belief.

I enclose the fee of **£18.**

Cheques should be made payable to **Companies House.**

Signed

H. Dolzys

Secretary/Director*

*(delete as appropriate)

Date

.....

This return includes continuation sheets.
(enter number)

Please ensure that you have completed all sections on this page.

To whom should Companies House direct any enquiries about the information shown in this return?----->

CULLEY LIFFORD HALL
CERTIFIED ACCOUNTANTS
QUEENS CHAMBERS
65 BRIDGE STREET
WALSALL WS1 1JQ

Telephone Ext

LIST OF PAST AND PRESENT MEMBERS

SCHEDULE TO FORM 363[illegible]

Continued overleaf

SCHEDULE TO FORM 363[illegible]