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Please complete in typescript,  
or in bold black capitals.

## Annual Return

CHFP001

Company Number 4042621

Company Name in full ROC MEETINGS AND EXHIBITIONS LIMITED

### Date of this return

The information in this return is made up to

Day Month Year

2 8 / 0 7 / 2 0 0 1

### Date of next return

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

      /       /            

### Registered Office

Show here the address at the date of  
this return.

25 NEW STREET SQUARE

Any change of  
registered office  
**must** be notified  
on form 287.

Post town LONDON

County / Region   

UK Postcode E C 4 A    3 L N

### Principal business activities

Show trade classification code number(s)  
for the principal activity or activities.

8512

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



A21 \*A906J2XNM 0372  
COMPANIES HOUSE 04/08/01

When you have completed and signed the form please send it to the  
Registrar of Companies at:

**Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff**  
for companies registered in England and Wales

or  
**Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB**  
for companies registered in Scotland

## Register of members

If the register of members is not kept at the registered office, state here where it is kept.

Post town

County / Region

UK Postcode

## Register of Debenture holders

If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state here where it is kept.

Post town

County / Region

UK Postcode

## Company type

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

Private unlimited company without share capital

☐☐☒☐☐☐☐

Please tick the appropriate box

## Company Secretary

Details of a new company secretary must be notified on form 288a.

(Please photocopy this area to provide details of joint secretaries).

Name

\* Style / Title

Forename(s)

Surname

Address

If a partnership give the names and addresses of the partners or the name of the partnership and office address.

**Usual residential address**

must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.

County / Region

Country

UK Postcode

## Directors

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

**Directors** In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.

Name \* Style / Title Prof  
Date of birth Day Month Year 3 1 / 0 8 / 1 9 4 0  
Forename(s) PETER  
Surname ARMSTRONG  
Address 38 PORTLAND PLACE  
Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.  
Post town LONDON  
County / Region UK Postcode W I N 4 J Q  
Country Nationality BRITISH  
Business occupation CONSULTANT RADIOLOGIST

\* Voluntary details.

**Directors** In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.

**Usual residential address** must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.

Name \* Style / Title  
Date of birth Day Month Year 0 1 / 0 6 / 1 9 6 3  
Forename(s) CHARLOTTE  
Surname BEARDMORE  
Address 207 PROVIDENCE SQUARE  
Usual residential address must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.  
Post town LONDON  
County / Region UK Postcode S E 1 2 E W  
Country Nationality BRITISH  
Business occupation RADIOGRAPHER

**Issued 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)

Totals		

**List of past and present shareholders**

(Use attached schedule where appropriate)

A full list is required if one was not included with either of the last two returns.

There were no changes in the period

☐

on paper

in another format

A list of changes is enclosed

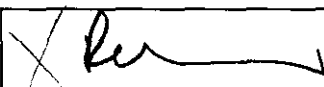
☐
☐

A full list of shareholders is enclosed

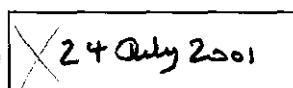
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☐
**Certificate**

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

Signed



Date



† Please delete as appropriate

† a director / secretary

When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to **Companies House**.

This return includes

2

continuation sheets.

(enter number)

Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should contact if there is any query.

HORWATH CLARK WHITEHILL

25 NEW STREET SQUARE

LONDON EC4A 3LN

Tel

Ref: AJP\S2354-86791\AD

DX number

DX exchange

## Directors

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

Name \* Style / Title \_\_\_\_\_

Day Month Year

**Directors** In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.

Date of birth 26/06/1944

Forename(s) PAULINE ANN

Surname CATTELL

Address 19 SYDNEY STREET

### Usual residential address

must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.

Post town LONDON

County / Region UK Postcode SW3 6PU

Country Nationality BRITISH

Business occupation CHIEF EXECUTIVE OFFICER

\* Voluntary details.

Name \* Style / Title \_\_\_\_\_

Day Month Year

**Directors** In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.

Date of birth 20/07/1945

Forename(s) ANTHONY JOHN

Surname COWLES

Address 38 PORTLAND PLACE

### Usual residential address

must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.

Post town LONDON

County / Region UK Postcode W1N 4JQ

Country Nationality BRITISH

Business occupation CHIEF EXECUTIVE

## Directors

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

<b>Name</b>	<b>* Style / Title</b>			
<b>Directors</b>				
In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.				
<b>Date of birth</b>	<b>Day</b>	<b>Month</b>	<b>Year</b>	
	2	0	1	9
	1	1	6	1
<b>Forename(s)</b>	ANTHONY			
<b>Surname</b>	HUDSON			
<b>Address</b>	47 RIDGEWELL CLOSE			
<b>Usual residential address</b>				
must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.				
<b>Post town</b>	LONDON			
<b>County / Region</b>			<b>UK Postcode</b>	S E 2 6 5 A P
<b>Country</b>			<b>Nationality</b>	BRITISH
<b>Business occupation</b>	DIRECTOR			

\* Voluntary details.

<b>Name</b>	<b>* Style / Title</b>	PROF.		
<b>Directors</b>				
In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.				
<b>Date of birth</b>	<b>Day</b>	<b>Month</b>	<b>Year</b>	
	1	0	6	9
	1	1	3	9
<b>Forename(s)</b>	MICHAEL NORMAN			
<b>Surname</b>	MAISEY			
<b>Address</b>	THOMAS GUY HOUSE			
<b>Usual residential address</b>	GUY'S HOSPITAL			
must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.				
<b>Post town</b>	LONDON			
<b>County / Region</b>			<b>UK Postcode</b>	S E 1 9 R T
<b>Country</b>			<b>Nationality</b>	BRITISH
<b>Business occupation</b>	PROF OF RADIOLOGICAL SCIENCES			

Company Number 4042621Company Name in full ROC MEETINGS AND EXHIBITIONS LIMITED**Company Secretary**

Details of a new company secretary must be notified on form 288a

(Please photocopy this area to provide details of joint secretaries).

\* Voluntary details

Name \* Style / Title

Forename(s)

Surname

Address

If a partnership give the names and addresses of the partners or the name of the partnership and office address.

Post town

**Usual residential address** must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.

County / Region

UK Postcode

Country

**Directors**

Details of new directors must be notified on form 288a

Please list directors in alphabetical order.

Name \* Style / Title

Day Month Year

**Directors** In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.

Date of birth

Forename(s)

Surname

Address

**Usual residential address** must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.

Post town

County / Region

Country

UK Postcode

Nationality

Business occupation

## Directors

Please list directors in alphabetical order.

Details of new directors must be notified on form 288a

<b>Name</b>	<b>* Style / Title</b>	Dr					
		Day	Month	Year			
<b>Directors</b>	In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	11 3 / 10 8 / 11 9 4 7				
		Forename(s)	PETER FREDERICK				
		Surname	SHARP				
<b>Address</b>		230 TADCASTER ROAD					
<b>Usual residential address</b>	must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.	Post town	YORK				
		County / Region			UK Postcode	Y O 2 4 1 E S	
		Country			Nationality	MEDICAL PHYSICIST	
<b>Business occupation</b>		BRITISH					

\* Voluntary details.

<b>Name</b>	<b>* Style / Title</b>						
		Day	Month	Year			
<b>Directors</b>	In the case of a director that is a corporation or a Scottish firm, the name is the corporate or firm name.	Date of birth	11 9 / 10 5 / 11 9 3 16				
		Forename(s)	PETER NEIL TEMPLE				
		Surname	WELLS				
<b>Address</b>		THE OLD MEETING HOUSE					
<b>Usual residential address</b>	must be given. In the case of a corporation or a Scottish firm, give the registered or principal office address.	SILVER STREET					
		Post town	WESTON IN GORDANO				
		County / Region	NORTH SOMERSET		UK Postcode	B S 2 0 8 Q A	
		Country			Nationality	BRITISH	
<b>Business occupation</b>		CLINICAL SCIENTIST					