



Companies House
— for the record —

AR01 (ef)

Annual Return



XS1H6H60

Received for filing in Electronic Format on the: **02/02/2010**

Company Name: **NATIONAL BACK PAIN ASSOCIATION**

Company Number: **00936855**

Date of this return: **02/12/2009**

SIC codes: **8514**

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

Situation of Registered Office: **16 ELMTREE ROAD
TEDDINGTON
MIDDLESEX
TW11 8ST**

Officers of the company

Service Address:

Company Director **1**

Type: **Person**
Full forename(s): **DR ANDREW RICHARD**
Surname: **AUTY**
Former names:
Service Address: **267 MARSTON ROAD
MARSTON
OXFORD
OXFORDSHIRE
OX3 0EW**

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

Date of Birth: **27/09/1960** *Nationality:* **BRITISH**
Occupation: **CONSULTANT**

Company Director **2**

Type: **Person**
Full forename(s): **ELIZABETH JANE**
Surname: **DODGSON**
Former names:
Service Address: **8 OSIER MEWS REGENCY QUAY
CHISWICK
LONDON
W4 2NT**

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

Date of Birth: **26/06/1960** *Nationality:* **BRITISH**
Occupation: **ALEXANDER TECHNIQUE
TEACHER**

Company Director **3**

Type: **Person**
Full forename(s): **ALAN DAVID HYDE**
Surname: **GARDNER**
Former names:
Service Address: **1 HYDE LANE**
 DANBURY
 CHELMSFORD
 ESSEX
 CM3 4QX

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

Date of Birth: **03/03/1939** *Nationality:* **BRITISH**
Occupation: **SURGEON**

Company Director **4**

Type: **Person**
Full forename(s): **BRIAN ROBERT**
Surname: **HAMMOND**
Former names:
Service Address: **1 THE CAUSEWAY**
 SUTTON
 SURREY
 SM2 5RS

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

Date of Birth: **28/05/1953** *Nationality:* **IRISH**
Occupation: **CHIROPRACTOR**

Company Director **5**

Type: **Person**
Full forename(s): **DR MICHAEL JOHN**
Surname: **MCKIERNAN**
Former names:
Service Address: **18 BRIDGETOWN ROAD**
 STRATFORD-UPON-AVON
 WARWICKSHIRE
 CV37 7JA

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

Date of Birth: **21/04/1943** *Nationality:* **BRITISH**
Occupation: **RETIRED**

Company Director **6**

Type: **Person**
Full forename(s): **DR CHARLES**
Surname: **PITHER**
Former names:
Service Address: **23-31 BEAVOR LANE**
 LONDON
 W6 9AR

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

Date of Birth: **21/07/1953** *Nationality:* **BRITISH**
Occupation: **DOCTOR AND PAIN**
 SPECIALIST

Company Director 7

Type: **Person**
Full forename(s): **ELIZABETH ANNE**
Surname: **PROSSER**
Former names:
Service Address: **3 CROXDEN CLOSE**
 EDGWARE
 MIDDLESEX
 HA8 5PS

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

Date of Birth: **23/01/1956** *Nationality:* **BRITISH**
Occupation: **INDEPENDENT CONSULTANT**

Company Director 8

Type: **Person**
Full forename(s): **DR LISA**
Surname: **ROBERTS**
Former names:
Service Address: **8 LUCAS CLOSE**
 ROWNHAMS
 SOUTHAMPTON
 SO16 8JD

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

Date of Birth: **21/05/1967** *Nationality:* **BRITISH**
Occupation: **LECTURER**
 PHYSIOTHERAPIST

Company Director **9**

Type: **Person**
Full forename(s): **ANN MARION**
Surname: **THOMSON**
Former names:
Service Address: **31 SYON PARK GARDENS
OSTERLEY
ISLEWORTH
MIDDLESEX
TW7 5NE**

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

Date of Birth: **22/05/1938** *Nationality:* **BRITISH**
Occupation: **HEAD OF SCHOOL
PHYSIOTHERAPY**

Authorisation

Authenticated

This form was authorised by one of the following:

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