



Companies House

**AR01** (ef)

**Annual Return**



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*Company Name:* **FARM PLACE LIMITED**

*Company Number:* **02663868**

*Date of this return:* **19/11/2013**

*SIC codes:* **74990**

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

*Situation of Registered Office:* **FIFTH FLOOR 80 HAMMERSMITH ROAD  
LONDON  
ENGLAND  
W14 8UD**

**Officers of the company**

*Company Secretary 1*

Type: **Person**  
Full forename(s): **MR DAVID JAMES**

Surname: **HALL**

Former names:

*Service Address recorded as Company's registered office*

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*Company Director 1*

Type: **Person**  
Full forename(s): **MR DAVID JAMES**

Surname: **HALL**

Former names:

*Service Address recorded as Company's registered office*

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

Date of Birth: **22/11/1962** Nationality: **UK**

Occupation: **COMPANY LAWYER**

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*Company Director* 2

*Type:* **Person**  
*Full forename(s):* **MR JASON DAVID**

*Surname:* **LOCK**

*Former names:*

*Service Address recorded as Company's registered office*

*Country/State Usually Resident:* **ENGLAND**

*Date of Birth:* **01/08/1972**                      *Nationality:* **BRITISH**

*Occupation:* **FINANCE DIRECTOR**

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## Statement of Capital (Share Capital)

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<b>Class of shares</b>	<b>ORDINARY</b>	<i>Number allotted</i>	<b>2</b>
		<i>Aggregate nominal value</i>	<b>2</b>
<i>Currency</i>	<b>GBP</b>	<i>Amount paid per share</i>	<b>1</b>
		<i>Amount unpaid per share</i>	<b>0</b>

*Prescribed particulars*

**NO PRESCRIBED PARTICULARS OF RIGHTS ATTACHED TO SHARES**

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## Statement of Capital (Totals)

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<i>Currency</i>	<b>GBP</b>	<i>Total number of shares</i>	<b>2</b>
		<i>Total aggregate nominal value</i>	<b>2</b>

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### *Full Details of Shareholders*

The details below relate to individuals / corporate bodies that were shareholders as at 19/11/2013 or that had ceased to be shareholders since the made up date of the previous Annual Return

*A full list of shareholders for the company are shown below*

*Shareholding 1* : **2 ORDINARY shares held as at the date of this return**  
*Name:* **PRIORY OLD ACUTE SERVICES LIMITED**

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### *Authorisation*

*Authenticated*

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

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