



Companies House

AR01 (ef)

Annual Return



Received for filing in Electronic Format on the: 11/02/2015

X4118BBM

Company Name: 1ST CLASS CARE SOLUTIONS LIMITED

Company Number: SC453580

Date of this return: 02/07/2014

SIC codes: 88100

Company Type: Private company limited by shares

Situation of Registered Office: ARGYLL HOUSE QUARRYWOOD COURT
LIVINGSTON
WEST LOTHIAN
EH54 6AX

Officers of the company

Company Director 1

Type: **Person**
Full forename(s): **MRS ELAINE MARIE**

Surname: **MARSHALL**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **SCOTLAND**

Date of Birth: **08/12/1969** Nationality: **BRITISH**

Occupation: **MANAGER**

Company Director 2

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

Surname: **MEIKLE**

Former names:

Service Address recorded as Company's registered office

Country/State Usually Resident: **SCOTLAND**

Date of Birth: **03/05/1966** Nationality: **BRITISH**

Occupation: **FARMER**

Statement of Capital (Share Capital)

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

Prescribed particulars

EACH SHARE HAS FULL RIGHTS IN THE COMPANY WITH RESPECT TO VOTING, DIVIDENDS AND DISTRIBUTIONS.

Statement of Capital (Totals)

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

Full Details of Shareholders

The details below relate to individuals / corporate bodies that were shareholders as at 02/07/2014 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 : **0 ORDINARY shares held as at the date of this return**
2 shares transferred on 2013-07-01

Name: **1ST CLASS CARE SOLUTIONS LIMITED**

Shareholding 2 : **1 ORDINARY shares held as at the date of this return**

Name: **DAVID IRELAND MEIKLE**

Shareholding 3 : **1 ORDINARY shares held as at the date of this return**

Name: **ELAINE MARIE MARSHALL**

Authorisation

Authenticated

This form was authorised by one of the following:

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