

BB/203085/275X4



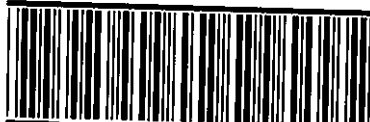
COMPANIES HOUSE

363_b

Annual Return

Please return to

THE REGISTRAR OF COMPANIES
COMPANI
CROWN W
CARDIFF
CF4 3UZ



A27 *AFIKZZK9* 204
COMPANIES HOUSE 01/10/97
COMPANIES HOUSE 04/09/97

of company number **CN** 718149 **U**

company name
FLIGHTSPARES LIMITED

This form should be completed in black.

Date of this return (See note 1)

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

If you are making the return up to an earlier date please show the date here.

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.

Registered Office (See note 3)

This is the address registered by Companies House as at 04/06/97

AVIATION WAY
SOUTHEND ON SEA
ESSEX
SS2 6UN

Principal business activities

(See note 4)

Show trade classification code number for principal activity or activities.

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

	Day	Month	Year
DA	210	06	97
DB			

Use this space to notify a change of registered office address.

RO _____

Post Town _____

County/Region _____

Postcode _____

PA	5	1	7	0				

Register of members

(See note 5)

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

RM	_____
Post Town	_____
County/Region	_____
Postcode	_____

Register of Debenture holders

(See note 6)

If there is a register of debenture holders and it is not kept at the registered office, state here where it is kept.

RD	_____
Post Town	_____
County/Region	_____
Postcode	_____

Company type (See note 7)

- 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

T1	<input type="checkbox"/>
T2	<input checked="" type="checkbox"/>
T3	<input type="checkbox"/>
T4	<input type="checkbox"/>
T5	<input type="checkbox"/>
T6	<input type="checkbox"/>
T7	<input type="checkbox"/>

Please mark the appropriate box

Company Secretary (See note 8)

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

Name _____ *Style/Title _____

Forenames _____

Surname _____

*Honours etc _____

Previous forenames _____

Previous surname _____

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

CS	_____
MATTHEW	_____
LITTLE	_____
AD	54 HIGH STREET
Post Town	FLITTON
County/Region	BEDS
Postcode	MK45 5DY
Country	_____

Address

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

* Voluntary details

Directors (continued)

(See note 8)

Name *Style/Title
 Forenames
 Surname
 *Honours etc
 Previous forenames
 Previous surname

Address

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

Date of birth
 Business occupation
 Other directorships

Details of new directors **must** be notified on form 288

CD

JEFFREY JACQUES
 HOBBS.

AD 1 CEDAR COPSE

Post Town BROMLEY
 County/Region KENT
 Postcode BRI 2NY Country _____
Day Month Year
 Date of birth **DO** 271343 Nationality **NA** BRITISH
OC DIRECTOR
OD

Name *Style/Title
 Forenames
 Surname
 *Honours etc
 Previous forenames
 Previous surname

Address

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

Date of birth
 Business occupation
 Other directorships

CD

DAVID BARRINGTON
 MARTIN

AD 97 WYATT'S PRIVE
 THORPE BAY

Post Town SOUTHEND ON SEA
 County/Region ESSEX
 Postcode SS1 3PE Country _____
Day Month Year
 Date of birth **DO** 241241 Nationality **NA** BRITISH
OC DIRECTOR
OD

Directors (continued)

(See note 8)

Name *Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

Details of new directors must be notified on form 288

CD

WILLIAM JOHN

MCKNIGHT

AD 75 ASHLEY ROAD

Post Town EPSOM

County/Region SURREY

Postcode KT18 5BN

Country

Day Month Year

DO 21011242Nationality **NA** BRITISH**OC** DIRECTOR**OD**

Name

*Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

CD

ROBERT ARTHUR

POWELL

AD 1845 N.W. 99th AVENUE

Post Town PLANTATION

County/Region FLORIDA 33322

Postcode

Country

USA

Day Month Year

DO 210119217Nationality **NA** BRITISH**OC** DIRECTOR**OD**

Directors (See note 8)

Please list directors in alphabetical order

Name

*Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

Details of new directors **must** be notified on form 288**CD**

ALAN ADRIAN

MARDING

AD 19 BEECH CLOSE

ALDERHOLT

Post Town FORDINGBRIDGE

County/Region HANTS

Postcode SP6 3DG

Country

Day Month Year

DO 012 015 518Nationality **NA** BRITISH**OC** DIRECTOR**OD**

Name

*Style/Title

Forenames

Surname

*Honours etc

Previous forenames

Previous surname

Address

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

Date of birth

Business occupation

Other directorships

* Voluntary details

CD

PETER JOSEPH KINDER

HASLEHURST

AD OLD CROWHOLT FARM

GAWSWORTH

Post Town MACCLESFIELD

County/Region CHESHIRE

Postcode SK11 0SH

Country 1

Day Month Year

DO 04 013 411Nationality **NA** BRITISH**OC** DIRECTOR**OD**

Issued share capital

(See note 9)

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

Class	Number	Aggregate Nominal Value
ORD	500 000	500 000.00
Totals	500 000	500 000.00

Please mark the appropriate box(es)

There were no changes in the period

on paper not on paper

A list of changes is enclosed

A full list of members is enclosed

List of past and present members

(See note 10)

(Use attached schedule where appropriate)

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

The last full members list was at
20/06/96

Elective resolutions

(See note 11)

(Private companies only)

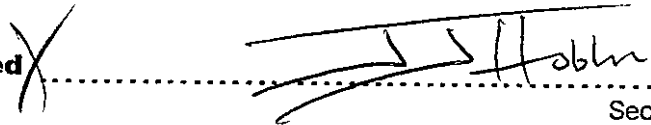
If an election is in force at the date of this return to dispense with annual general meetings, mark this box.

If an election 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 **£15.**

Signed  Secretary/Director *
Date (* delete as appropriate)

This return includes continuation sheets.
(enter number)

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

.....

.....

.....

..... Postcode

Telephone Extension

- Check List** Have you included
- your principal business activity code?
 - dates of birth of all directors?
 - a signature of either a director or secretary?
 - a members list (if required)?

