



Companies House

AR01 (ef)

Annual Return



Received for filing in Electronic Format on the: **18/12/2014**

X3N0FNCJ

Company Name: **NPPG**

Company Number: **04620347**

Date of this return: **18/12/2014**

SIC codes: **94120**

Company Type: **Private company limited by guarantee exempt under section 60**

Situation of Registered Office: **38 MYRTLE DRIVE
BURWELL
CAMBRIDGESHIRE
ENGLAND
CB25 0AJ**

Single Alternative Inspection Location (SAIL)

The address for an alternative location to the company's registered office for the inspection of registers is:

HAZLEMERE 70 CHORLEY NEW ROAD
BOLTON
LANCS
ENGLAND
BL1 4BY

There are no records kept at the above address

Officers of the company

Company Secretary 1

Type: **Person**
Full forename(s): **MR NIGEL**

Surname: **GOODING**

Former names:

Service Address: **38 MYRTLE DRIVE
BURWELL
CAMBRIDGESHIRE
ENGLAND
CB25 0AJ**

Company Director 1

Type: **Person**
Full forename(s): **MR PHILIP ANDREW**

Surname: **DALE**

Former names:

Service Address: **38 MYRTLE DRIVE
BURWELL
CAMBRIDGESHIRE
ENGLAND
CB25 0AJ**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **25/03/1957** *Nationality:* **BRITISH**

Occupation: **PHARMACIST**

Company Director 2

Type: **Person**
Full forename(s): **MR NIGEL**

Surname: **GOODING**

Former names:

Service Address: **38 MYRTLE DRIVE
BURWELL
CAMBRIDGESHIRE
ENGLAND
CB25 0AJ**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **12/06/1971**

Nationality: **BRITISH**

Occupation: **TRUSTEE**

Company Director 3

Type: **Person**
Full forename(s): **MRS DIANA JANE**

Surname: **MOWBRAY**

Former names:

Service Address: **38 MYRTLE DRIVE
BURWELL
CAMBRIDGESHIRE
ENGLAND
CB25 0AJ**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **06/08/1969** *Nationality:* **BRITISH**

Occupation: **PHARMACIST**

Company Director 4

Type: **Person**
Full forename(s): **MR STEPHEN RICHARD**

Surname: **TOMLIN**

Former names:

Service Address: **38 MYRTLE DRIVE
BURWELL
CAMBRIDGESHIRE
ENGLAND
CB25 0AJ**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **08/07/1967** *Nationality:* **BRITISH**

Occupation: **PHARMACIST**

Authorisation

Authenticated

This form was authorised by one of the following:

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