



Companies House

**AR01** (ef)

**Annual Return**



Received for filing in Electronic Format on the: 17/12/2015

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*Company Name:* **DISABLED PERSONS HOUSING SERVICE (FIFE) LIMITED**

*Company Number:* **SC226571**

*Date of this return:* **13/12/2015**

*SIC codes:* **63990**

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

*Situation of Registered Office:* **WEST SHOP LAW'S CLOSE 339 HIGH STREET  
KIRKCALDY  
FIFE  
KY1 1JN**

**Officers of the company**

## *Company Secretary 1*

*Type:* **Person**

*Full forename(s):* **PHILIP**

*Surname:* **REVIE**

*Former names:*

*Service Address:* **48 FLOCKHOUSE AVENUE  
BALLINGRY  
LOCHGELLY  
FIFE  
KY5 8JQ**

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*Company Director* 1

*Type:* **Person**  
*Full forename(s):* **HARRY GRAHAM**

*Surname:* **FERRIER**

*Former names:*

*Service Address:* **7 AITKEN COURT  
BUTE WYND  
KIRKCALDY  
KY1 1QA**

*Country/State Usually Resident:* **SCOTLAND**

*Date of Birth:* **\*\*/06/1947**                      *Nationality:* **BRITISH**

*Occupation:* **NONE**

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*Company Director* 2

*Type:* **Person**

*Full forename(s):* **ALEXANDER**

*Surname:* **HADDOW**

*Former names:*

*Service Address:* **51 WESTWOOD ROAD  
GLENROTHES  
FIFE  
KY7 5BB**

*Country/State Usually Resident:* **SCOTLAND**

*Date of Birth:* **\*\*/10/1967**

*Nationality:* **BRITISH**

*Occupation:* **NONE**

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*Company Director* 3

*Type:* **Person**

*Full forename(s):* **PHILIP**

*Surname:* **REVIE**

*Former names:*

*Service Address:* **48 FLOCKHOUSE AVENUE  
BALLINGRY  
LOCHGELLY  
FIFE  
KY5 8JQ**

*Country/State Usually Resident:* **SCOTLAND**

*Date of Birth:* **\*\*/09/1969**

*Nationality:* **BRITISH**

*Occupation:* **DIRECTOR**

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*Company Director* 4

*Type:* **Person**

*Full forename(s):* **JOHN**

*Surname:* **SANDIE**

*Former names:*

*Service Address:* **24 TEMPLEHALL AVENUE  
KIRKCALDY  
FIFE  
KY2 6BZ**

*Country/State Usually Resident:* **SCOTLAND**

*Date of Birth:* **\*\*/03/1952**

*Nationality:* **BRITISH**

*Occupation:* **RETIRED**

### *Authorisation*

*Authenticated*

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

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