

# 371s

## ANNUAL RETURN

- **YOUR 'SHUTTLE' ANNUAL RETURN FORM**
- Please return the form within 28 days of the date shown on the first page.
- All companies, **including non-trading** ('dormant') companies must file annual returns and accounts.
- Please detach this page before returning the form and schedule along with the fee of £20 payable to Companies House.

### **Please Note:**

**You can no longer make changes to company information on form. If any changes are made this form will be rejected.**

If you need to contact us  
please quote reference:



Waterfront Plaza  
8 Laganbank Road  
BELFAST  
BT1 3BS

Tel: 0303 1234 500

Web: [www.companieshouse.gov.uk](http://www.companieshouse.gov.uk)

# 371s

## ANNUAL RETURN

Company Number:

Company Name:

Company Type:

Date:

A full list of members is enclosed

### DATE OF THIS RETURN

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

DAY	MONTH	YEAR
<input type="text"/>	<input type="text"/>	<input type="text"/>

### DATE OF NEXT RETURN

If you wish to make up your next return to a date earlier than the anniversary of this return please show the date here. Companies Registry will then send a form at the appropriate time.

DAY	MONTH	YEAR
<input type="text"/>	<input type="text"/>	<input type="text"/>

### REGISTERED OFFICE

This is the address registered by Companies Registry  
If you wish to change this address please file **form 295**

LOCATION OF REGISTER OF MEMBERS  
This address must be in Northern Ireland

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LOCATION OF REGISTER OF DEBENTURE HOLDERS  
This address must be in Northern Ireland

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Appointments / Resignations and Change in Particulars  
**must** be notified on [form 296](#)

Please go to the forms section of our website if you require a continuation page [www.companieshouse.gov.uk](http://www.companieshouse.gov.uk)

Company Secretary

Forename \_\_\_\_\_  
Surname \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Post Town \_\_\_\_\_  
County / Region \_\_\_\_\_  
Post Code \_\_\_\_\_  
Country \_\_\_\_\_

Appointments / Resignations and Change in Particulars  
**must** be notified on [form 296](#)

Current Directors

Forename \_\_\_\_\_  
Surname \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Post Town \_\_\_\_\_  
County / Region \_\_\_\_\_  
Post Code \_\_\_\_\_  
Country \_\_\_\_\_  
Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Nationality \_\_\_\_\_  
Occupation \_\_\_\_\_  
Other Directorships Yes/No

Forename \_\_\_\_\_  
Surname \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Post Town \_\_\_\_\_  
County / Region \_\_\_\_\_  
Post Code \_\_\_\_\_  
Country \_\_\_\_\_  
Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Nationality \_\_\_\_\_  
Occupation \_\_\_\_\_  
Other Directorships Yes/No

Current Directors

Forename \_\_\_\_\_  
Surname \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Post Town \_\_\_\_\_  
County / Region \_\_\_\_\_  
Post Code \_\_\_\_\_  
Country \_\_\_\_\_  
Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Nationality \_\_\_\_\_  
Occupation \_\_\_\_\_  
Other Directorships Yes/No \_\_\_\_\_

Forename \_\_\_\_\_  
Surname \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Post Town \_\_\_\_\_  
County / Region \_\_\_\_\_  
Post Code \_\_\_\_\_  
Country \_\_\_\_\_  
Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Nationality \_\_\_\_\_  
Occupation \_\_\_\_\_  
Other Directorships Yes/No \_\_\_\_\_

Forename \_\_\_\_\_  
Surname \_\_\_\_\_  
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\_\_\_\_\_  
Post Town \_\_\_\_\_  
County / Region \_\_\_\_\_  
Post Code \_\_\_\_\_  
Country \_\_\_\_\_  
Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Nationality \_\_\_\_\_  
Occupation \_\_\_\_\_  
Other Directorships Yes/No \_\_\_\_\_

SHARE CAPITAL (See Note 8)  
 Enter details of all shares in issue at the date of this return.

CLASS	NUMBER	AGGREGATE VALUE
_____	_____	_____
_____	_____	_____
_____	_____	_____
TOTALS	_____	_____

**(The above details are those currently held on our records)**

LIST OF PAST AND PRESENT MEMBERS  
 (Use attached schedule and additional sheets where appropriate) A full list is required if one was not included with either of the last two returns.

ELECTIVE RESOLUTIONS  
 (Private companies only)

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

If an elective resolution is in force at the date of this return to dispense with laying accounts in general meetings, mark the box.

**CERTIFICATE**

I certify that the information given in this return is true to the best of my knowledge and belief.

SIGNED \_\_\_\_\_  
 Secretary/Director  
 (delete as appropriate)

DATE \_\_\_\_\_

Cheques should be made payable to the Companies House

This return includes Continuation sheets \_\_\_\_\_

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

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Tel \_\_\_\_\_ Ext \_\_\_\_\_





Appointments / Resignations and Change in Particulars  
**must** be notified on [form 296](#)

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Company Secretary

Forename \_\_\_\_\_  
Surname \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Post Town \_\_\_\_\_  
County / Region \_\_\_\_\_  
Post Code \_\_\_\_\_  
Country \_\_\_\_\_

Appointments / Resignations and Change in Particulars  
**must** be notified on [form 296](#)

Current Directors

Forename \_\_\_\_\_  
Surname \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Post Town \_\_\_\_\_  
County / Region \_\_\_\_\_  
Post Code \_\_\_\_\_  
Country \_\_\_\_\_  
Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Nationality \_\_\_\_\_  
Occupation \_\_\_\_\_  
Other Directorships Yes/No

Forename \_\_\_\_\_  
Surname \_\_\_\_\_  
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\_\_\_\_\_  
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County / Region \_\_\_\_\_  
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Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Nationality \_\_\_\_\_  
Occupation \_\_\_\_\_  
Other Directorships Yes/No