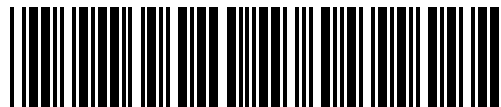




Appointment of Director

Company Name: **ST. KENTIGERN HOSPICE**

Company Number: **02216886**



Received for filing in Electronic Format on the: **20/05/2021**

XA4WCVX4

New Appointment Details

Date of Appointment: **19/05/2021**

Name: **MRS ANGELA HIND**

The company confirms that the person named has consented to act as a director.

Service address recorded as Company's registered office

Country/State Usually Resident: **WALES**

Date of Birth: ****/12/1966**

Nationality: **BRITISH**

Occupation: **RETIRED**

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor