

600

Notice of appointment of liquidator in a members' or creditors' voluntary winding up



Companies House

For further information, please refer to
our guidance at
www.gov.uk/companieshouse

1 Company details

Company number 0 8 0 1 2 1 5 2

Company name in full Sharrow Bay Hotel Limited

→ **Filling in this form**
Please complete in typescript or in
bold black capitals.

2 Liquidator's name

Full forename(s) Michael Robert

Surname Fortune

3 Liquidator's address

Building name/number 1580 Parkway

Street Solent Business Park

Post town Whiteley, Fareham

County/Region Hampshire

Postcode P O 1 5 7 A G

Country

4 Liquidator's email address or telephone number ¹

Email address creditors@portbfs.co.uk

Telephone number 01489 550 440

¹ You must give an email address or
telephone number. All information
on this form will appear on the
public record.

5 Insolvency practitioner number

Number 0 0 8 8 1 8

600

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6 Liquidator's name ^①

Full forename(s)

Carl Derek

Surname

Faulds

① Other Liquidator's details

Use this section to tell us about another liquidator.

7 Liquidator's address ^②

Building name/number

1580 Parkway

Street

Solent Business Park

Post town

Whiteley, Fareham

County/Region

Hampshire

Postcode

P O 1 5 7 A G

Country

② Other Liquidator's details

Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.

8 Liquidator's email address or telephone number ^③

Email address

creditors@portbfs.co.uk

Telephone number

01489 550 440

③ You must give an email address or telephone number. All information on this form will appear on the public record.

9 Insolvency practitioner number

Number

0 0 8 7 6 7

10 Statement of appointment

I confirm the appointment of the liquidator(s) on

Date

d	0	d	2	m	1	m	0	y	2	y	0	y	2	y	0
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

11 Appointment details

The appointment was made by
(Tick one)

- Company
 Creditors

12 Type of liquidation

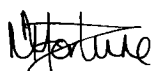
Tick to confirm the liquidation type

- Members
 Creditors

13 Sign and date

Liquidator's signature

Signature

X  X

Signature date

d	0	d	5	m	1	m	0	y	2	y	0	y	2	y	0
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

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voluntary winding up

 **Presenter information**

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

Contact name **Michael Robert Fortune**

Company name **Portland Business & Financial Solutions**

Address **1580 Parkway**

Solent Business Park

Post town **Whiteley, Fareham**

County/Region **Hampshire**

Postcode **P O 1 5 7 A G**

Country

DX

Telephone **01489 550 440**

 **Checklist**

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- The company name and number match the information held on the public Register.
- You have signed and dated the form.

 **Important information**

All information on this form will appear on the public record.

 **Where to send**

You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:

The Registrar of Companies, Companies House,
Crown Way, Cardiff, Wales, CF14 3UZ.
DX 33050 Cardiff.

 **Further information**

For further information please see the guidance notes on the website at www.gov.uk/companieshouse or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.gov.uk/companieshouse