



## Change of Particulars for Director

Company Name: **ALISON GIBBINS MEDICAL SUPPORT SERVICES LIMITED**

Company Number: **10077487**



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XA38RMTF

### Details Prior to Change

Original name: **MRS ALISON GIBBINS**

Date of Birth: **\*\*/06/1974**

### New Details

Date of Change: **26/04/2021**

Country/State Usually  
Resident **WALES**

## **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