Companies House

AP01 (ef)

Appointment of Director

X6HXZIDM

Company Name: **THE NATIONAL INSTITUTE OF MEDICAL HERBALISTS**

Company Number: **00044483**

Received for filing in Electronic Format on the: **27/10/2017**

New Appointment Details

Date of Appointment: **14/10/2017**

Name: **MS ANKE WELLHAUSEN**

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: **UNITED KINGDOM**

Date of Birth: ****/11/1965**

Nationality: **GERMAN**

Occupation: **MEDICAL HERBALIST**

Former Names:

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.