



Termination of a Director Appointment

Company Name: **BROADWAY HOMELESSNESS AND SUPPORT**

Company Number: **01299109**



Received for filing in Electronic Format on the: **03/04/2014**

X351L2YA

Resignation Details

Date of resignation: **11/03/2014**

Name: **MS SHARON LEE TOYE**

Authorisation

Authenticated

This form was authorised by one of the following:

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