



Appointment of Director

Company Name: **STOPAIDS**

Company Number: **02589198**



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New Appointment Details

Date of Appointment: **19/11/2019**

Name: **MS GILLIAN HOLMES**

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

Service Address: **STOPAIDS STOPAIDS
THE GRAYSTON CENTRE, 28 CHARLES SQUARE
LONDON
UNITED KINGDOM
N1 6HT**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/03/1962**

Nationality: **BRITISH**

Occupation: **DIRECTOR FUNDING AND ENGAGEMENT**

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