



Confirmation Statement

Company Name: **SOURCE INSURANCE LIMITED**

Company Number: **02864963**



X5ISCIOA

Received for filing in Electronic Format on the: **31/10/2016**

Company Name: **SOURCE INSURANCE LIMITED**

Company Number: **02864963**

Confirmation **22/10/2016**

Statement date:

Statement of Capital (Share Capital)

Class of Shares:	ORDINARY	Number allotted	2000
Currency:	GBP	Aggregate nominal value:	2000
Prescribed particulars			
NONE			

Statement of Capital (Totals)

Currency:	GBP	Total number of shares:	2000
		Total aggregate nominal value:	2000
		Total aggregate amount unpaid:	0

Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became **06/04/2016**
registrable:

Name: **MR ANDREW ALISTAIR MASTERS**

Service address recorded as Company's registered office

Country/State Usually **WALES**
Resident:

Date of Birth: ****/02/1964**

Nationality: **BRITISH**

Nature of control

The person holds, directly or indirectly, more than 25% but not more than 50% of the shares in the company.

The person has the right, directly or indirectly, to appoint or remove a majority of the board of directors of the company.

The person holds, directly or indirectly, more than 25% but not more than 50% of the voting rights in the company.

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager,
Judicial Factor