



Appointment of Director

Company Name: **THE SHROPSHIRE COUNTY FEDERATION OF WOMEN'S INSTITUTES**

Company Number: **02996091**



Received for filing in Electronic Format on the: **08/12/2023**

XCHYCC9P

New Appointment Details

Date of Appointment: **18/05/2023**

Name: **ANN OWEN**

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

Service Address: **9 PARK PLAZA
BATTLEFIELD ENTERPRISE PARK
SHREWSBURY
ENGLAND
SY1 3AF**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/08/1951**

Nationality: **BRITISH**

Occupation: **NONE**

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