



## Appointment of Director

Company Name: **PEMBROKESHIRE CARE SOCIETY**

Company Number: **03062605**



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### **New Appointment Details**

Date of Appointment: **25/02/2020**

Name: **MR TIMOTHY COLIN BROWN**

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

Service Address: **HAZELDEN HOUSE 101 CHURCH ROAD  
LLANSTADWELL  
MILFORD HAVEN  
PEMBROKESHIRE  
WALES  
SA73 1EA**

Country/State Usually Resident: **WALES**

Date of Birth: **\*\*/10/1956**

Nationality: **BRITISH**

Occupation: **SOLICITOR**

## **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**