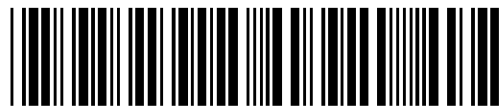




Appointment of Director

Company Name: **BRITISH SOCIETY FOR PLANT PATHOLOGY**

Company Number: **03576579**



Received for filing in Electronic Format on the: **18/01/2019**

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New Appointment Details

Date of Appointment: **01/01/2019**

Name: **PROFESSOR DAVID BRIAN COLLINGE**

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

Service Address: **DEPARTMENT OF PLANT AND ENVIRONMENTAL
SCIENCES & C UNIVERSITY OF COPENHAGEN
THORVALDSENSVEJ 40
1871-FREDERIKSBERG C
DENMARK**

Country/State Usually
Resident: **DENMARK**

Date of Birth: ****/12/1958**

Nationality: **BRITISH,DANISH**

Occupation: **PROFESSOR OF PLANT PATHOLOGY**

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