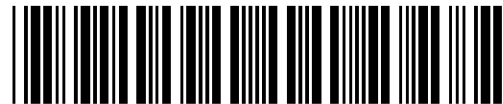




**Notice of Individual Person
with Significant Control**

Company Name: **PARTNERSHIP OF CARE LIMITED**

Company Number: **04721898**



Received for filing in Electronic Format on the: **01/02/2018**

X6YW6WFF

Notification Details

Date that person became **01/07/2016**
registrable:

Name: **MRS JANINE HAZEL DARLING**

Service address recorded as Company's registered office

Country/State Usually **WALES**
Resident:

Date of Birth: ****/01/1972**

Nationality: **BRITISH**

Nature of control

The person has the right to exercise, or actually exercises, significant influence or control over the company.

Register entry date

Register entry date **01/07/2016**

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