



**Appointment of Director**



X3ILNF6Z

*Company Name:* **10 COSWAY STREET LIMITED**

*Company Number:* **04905004**

*Received for filing in Electronic Format on the:* **16/10/2014**

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*New Appointment Details*

*Date of Appointment:* **15/10/2014**

*Name:* **MR DAVID MICHAEL THOMAS GIBSON**

*Consented to Act:* **YES**

*Service Address:* **GARDEN FLAT 10 COSWAY STREET  
COSWAY STREET  
LONDON  
ENGLAND  
NW1 5NR**

*Country/State Usually Resident:* **UNITED KINGDOM**

*Date of Birth:* **13/03/1967**

*Nationality:* **BRITISH**

*Occupation:* **MANAGING DIRECTOR**

*Former Names:*

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## *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.