CHFP080

FORM No 600

Notice of appointment of liquidator Voluntary winding up (Members or Creditors)

Please do not Write in this margin

Please complete legibly preferably in black type or bold block lettering

*Insert full name of company

Pursuant to section 109 of the Insolvency Act 1986

To the Registrar of Companies (Address Overleaf)

For official use

Company number

05619347

Name of Company

Compensation Professionals Network Limited

Nature of Business

call centre operations

I/We give notice that I/We have been appointed liquidator(s) of the above company on 27 August 2013

The appointment was by Creditors via previous Administration

Type of liquidation Creditors

Name of Liquidator

Office holder number

Address

Robert Neil Dymond 10430

Wilson Field Limited

The Manor House

260 Ecclesall Road South

Sheffield S11 9PS

Signature

Name of Liquidator Office holder number

Address

Lisa Jane Hogg

9037

Wilson Field Limited The Manor House

260 Ecclesall Road South

Sheffield

Signature

Date

Date

29 8

Presentor's name and address and

reference (If any)

COMP01A

Robert Neil Dymond Wilson Field Limited

The Manor House

260 Ecclesall Road South

Sheffield

S11 9PS

Time Critical Reference

For Official Use General Section



06/09/2013 COMPANIES HOUSE