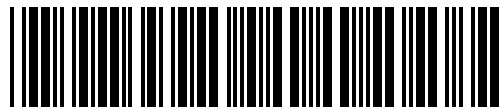




Appointment of Director

Company Name: **ATLANTIC HEALTHCARE PLC**

Company Number: **05878612**



Received for filing in Electronic Format on the: **14/02/2022**

XAXUJJTF

New Appointment Details

Date of Appointment: **11/02/2022**

Name: **PROFESSOR MICHAEL GEOFFREY LEWIS**

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

Service address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/08/1958**

Nationality: **BRITISH**

Occupation: **DIRECTOR**

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