



Companies House

CS01 (ef)

Confirmation Statement

Company Name: **ALTHEA HEALTHCARE PROPERTIES LIMITED**

Company Number: **06368379**



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Company Name: **ALTHEA HEALTHCARE PROPERTIES LIMITED**

Company Number: **06368379**

Confirmation **29/06/2023**

Statement date:

Statement of Capital (Share Capital)

Class of Shares:	A	Number allotted	7200
	ORDINARY	Aggregate nominal value:	7200

Currency: **GBP**

Prescribed particulars

**FULL VOTING RIGHTS FULL RIGHTS TO DIVIDENDS AND PARTICIPATE IN DISTRIBUTION
FULL RIGHTS TO PARTICIPATE IN DISTRIBUTION ON WINDING UP FULL REDEMPTION
RIGHTS**

Class of Shares:	B	Number allotted	2800
	ORDINARY	Aggregate nominal value:	2800

Currency: **GBP**

Prescribed particulars

**FULL VOTING RIGHTS FULL RIGHTS TO DIVIDENDS AND PARTICIPATE IN DISTRIBUTION
FULL RIGHTS TO PARTICIPATE IN DISTRIBUTION ON WINDING UP FULL REDEMPTION
RIGHTS**

Class of Shares:	C	Number allotted	1
	ORDINARY	Aggregate nominal value:	1

Currency: **GBP**

Prescribed particulars

**FULL VOTING RIGHTS FULL RIGHTS TO DIVIDENDS AND PARTICIPATE IN DISTRIBUTION
FULL RIGHTS TO PARTICIPATE IN DISTRIBUTION ON WINDING UP FULL REDEMPTION
RIGHTS**

Statement of Capital (Totals)

Currency:	GBP	Total number of shares:	10001
		Total aggregate nominal value:	10001
		Total aggregate amount	0
		unpaid:	

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager,
Judicial Factor