



**Notice of Individual Person
with Significant Control**

Company Name: **ST. PAULS SQUARE DENTAL PRACTICE LIMITED**

Company Number: **06487101**



Received for filing in Electronic Format on the: **06/04/2018**

X73BL4XM

Notification Details

Date that person became **06/04/2018**
registrable:

Name: **DR DAMIEN THOMAS MCLAUGHLIN**

Service address recorded as Company's registered office

Country/State Usually **ENGLAND**
Resident:

Date of Birth: ****/12/1980**

Nationality: **BRITISH**

Nature of control

The person holds, directly or indirectly, more than 25% but not more than 50% of the shares in the company.

Register entry date

Register entry date **06/04/2018**

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