



## Appointment of Director

Company Name: **FULL CIRCLE CARE LTD**

Company Number: **06610632**



Received for filing in Electronic Format on the: **16/10/2018**

**X7GOQB2G**

### **New Appointment Details**

Date of Appointment: **15/10/2018**

Name: **MR KALVINDER BAINS**

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: **\*\*/09/1964**

Nationality: **BRITISH**

Occupation: **COMPANY 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**