In accordan .e with section 109 of the Insolvency Act 1986

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# Notice of appointment of liquidator in a members' or creditors' voluntary winding up



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A13 23/03/2018
COMPANIES HOUSE

Company details → Filling in this form 7 2 Company number 6 5 0 Please complete in typescript or in Company name in full C & B (2008) LIMITED bold black capitals. Liquidator's name Full forename(s) **STEWART** Surname **BENNETT** Liquidator's address Building name/number WARWICK HOUSE Street 116 PALMERSTON ROAD Post town **BUCKHURST HILL** County/Region **ESSEX** Postcode 1 G 9 Country Liquidator's email address or telephone number • You must give an email address or telephone number. All information **Email address** Stewart.bennett@STBennett.Co.UK on this form will appear on the public record. Telephone number 020 8505 2941 Insolvency practitioner number Number

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6	Liquidator's name <sup>®</sup>							
Full forename(s)		Other Liquidator's details Use this section to tell us about						
Surname		another liquidator.						
7	Liquidator's address ®							
Building name/number		Other Liquidator's details Use this section to tell us about						
Street		another liquidator. Use the continuation page to tell us about more than two liquidators.						
Post town								
County/Region								
Postcode								
Country								
8	Liquidator's email address or telephone number ©	You must give an email address or						
Email address		telephone number. All information on this form will appear on the						
Telephone number		public record.						
9	Insolvency practitioner number							
Number								
10	Statement of appointment							
	I confirm the appointment of the liquidator(s) on							
Date	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$							
11	Appointment details							
	The appointment was made by (Tick one)  Company  Creditors							
12	Type of liquidation							
12								
	Tick to confirm the liquidation type  ☑ Members							
	☐ Creditors							
13	Sign and date							
iquidator's signature	Signature X . < Dernett	×						
Signature date	$\begin{bmatrix} d & 2 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0$							

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## Presenter information

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

Contact name Stewart Bennett									
Company name S T Bennett & Co									
			•						
Address	War	wick	Ηοι	ıse					
116 Palmerston Road									
	·								
Post town	Bucl	khur	st Hi	II					
County/Region Essex									
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Postcode			G	9		5	L	Q	
Country		1	G	9	<u> </u>	5	L	Q	
		I	G	9		5	L	Q —	

### ✓ Checklist

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- ☐ The company name and number match the information held on the public Register.
- ☐ You have signed and dated the form.

#### Important information

All information on this form will appear on the public record.

### ■ Where to send

You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:

The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ. DX 33050 Cardiff.

#### **Further information**

For further information please see the guidance notes on the website at www.gov.uk/companieshouse or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.gov.uk/companieshouse

In accordance with
section 109 of the
Insolvency Act 1986.

600 - continuation page

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1	Com	pany	det	ails				
Company number								
Company name in full								_
2	Liqu	idato	r's r	ame				
Full forename(s)								
Surname								
3	Liqu	idato	r's a	ddre	SS			
Building name/number				_				
Street					_			
								_
Post town			-	-				
County/Region								
Postcode								
Country								_
4	Liqu	idato	r's e	mail	add	ress	or telephone number •	
Email address								• You must give an email address or
Telephone number								<ul> <li>telephone number. All information on this form will appear on the public record.</li> </ul>
5	Inso	lvenc	y pr	actit	ione	r nu	mber	
Insolvency practitioner number					=			