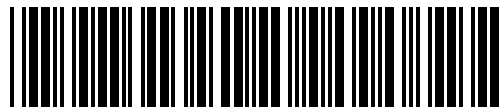




Appointment of Director

Company Name: **M & S CARE LIMITED**

Company Number: **07048872**



Received for filing in Electronic Format on the: **08/04/2021**

XA1Z3RR7

New Appointment Details

Date of Appointment: **31/03/2021**

Name: **MR PETER ANDREW STAMPS**

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

Service Address: **FIRST FLOOR OFFICES SWEEPS DITCH
44A GRESHAM ROAD
STAINES-UPON-THAMES
ENGLAND
TW18 2AN**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: ****/12/1963**

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