



Companies House

**AP01** (ef)

**Appointment of Director**



X5BNWE6I

*Company Name:* **HUDSON FOSTER INSURANCE & RISK MANAGEMENT LTD.**

*Company Number:* **07650289**

*Received for filing in Electronic Format on the:* **21/07/2016**

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*New Appointment Details*

*Date of Appointment:* **29/10/2015**

*Name:* **MS MARIE JOWETT**

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

*Service Address:* **23 STOURTON ROAD  
ILKLEY  
WEST YORKSHIRE  
ENGLAND  
LS29 9BG**

*Country/State Usually Resident:* **ENGLAND**

*Date of Birth:* **\*\*/04/1961**

*Nationality:* **BRITISH**

*Occupation:* **DIRECTOR**

*Former Names:*

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## *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.