



## Appointment of Director

Company Name: **HEALOGICS WOUND HEALING CENTRES CIC**

Company Number: **07715222**



Received for filing in Electronic Format on the: **23/12/2021**

XAJYB6TD

### New Appointment Details

Date of Appointment: **21/12/2021**

Name: **MR DAVID GEORGE GRAY**

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: **SCOTLAND**

Date of Birth: **\*\*/04/1967**

Nationality: **BRITISH**

Occupation: **CLINICAL PARTNER/ NURSE**

## **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**



Companies House

**COMPANY NAME: PIONEER WOUND HEALING CENTRES CIC**

**COMPANY NUMBER: 07715222**

**A second filed AP01 was registered on 28/01/22**