



**Notice of Individual Person
with Significant Control**

Company Name: **GABLES MEDICAL (OFFENDER HEALTH) LTD**

Company Number: **08241195**



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X6BHEW7E

Notification Details

Date that person became **06/04/2016**
registrable:

Name: **DR JUSTIN JOHN LAWSON**

Service address recorded as Company's registered office

Country/State Usually **ENGLAND**
Resident:

Date of Birth: ****/05/1961**

Nationality: **BRITISH**

Nature of control

The person holds, directly or indirectly, more than 25% but not more than 50% of the shares in the company.

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