

600

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



Companies House

WEDNESDAY



A02 *A904BK8X* 04/03/2020 #89
COMPANIES HOUSE

1 Company details

Company number 0 8 5 1 2 9 3 1

Company name in full Canary Care Limited

→ Filling in this form
Please complete in typescript or in
bold black capitals.

2 Liquidator's name

Full forename(s) Thomas Charles

Surname Russell

3 Liquidator's address

Building name/number The White Building

Street 1-4 Cumberland Place

Post town Southampton

County/Region

Postcode S O 1 5 2 N P

Country

4 Liquidator's email address or telephone number ^①

Email address

Telephone number 023 8022 1222




① You must give an email address or
telephone number. All information
on this form will appear on the
public record.

5 Insolvency practitioner number

Number 1 5 9 9 4

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6 Liquidator's name^①																	
Full forename(s)																	
Surname																	
① Other Liquidator's details Use this section to tell us about another liquidator.																	
7 Liquidator's address^②																	
Building name/number																	
Street																	
Post town																	
County/Region																	
Postcode																	
Country																	
② Other Liquidator's details Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.																	
8 Liquidator's email address or telephone number^③																	
Email address																	
Telephone number																	
③ You must give an email address or telephone number. All information on this form will appear on the public record.																	
9 Insolvency practitioner number																	
Number																	
10 Statement of appointment																	
I confirm the appointment of the liquidator(s) on																	
Date	<table border="1"><tr><td>d</td><td>2</td><td>d</td><td>0</td><td>m</td><td>0</td><td>m</td><td>2</td><td>y</td><td>2</td><td>y</td><td>0</td><td>y</td><td>2</td><td>y</td><td>0</td></tr></table>	d	2	d	0	m	0	m	2	y	2	y	0	y	2	y	0
d	2	d	0	m	0	m	2	y	2	y	0	y	2	y	0		
11 Appointment details																	
The appointment was made by (Tick one) <input type="checkbox"/> Company <input checked="" type="checkbox"/> Creditors																	
12 Type of liquidation																	
Tick to confirm the liquidation type <input type="checkbox"/> Members <input checked="" type="checkbox"/> Creditors																	
13 Sign and date																	
Liquidator's signature	<table border="1"><tr><td>Signature</td><td></td><td>X</td></tr></table>	Signature		X													
Signature		X															
Signature date	<table border="1"><tr><td>d</td><td>2</td><td>d</td><td>8</td><td>m</td><td>0</td><td>m</td><td>2</td><td>y</td><td>2</td><td>y</td><td>0</td><td>y</td><td>2</td><td>y</td><td>0</td></tr></table>	d	2	d	8	m	0	m	2	y	2	y	0	y	2	y	0
d	2	d	8	m	0	m	2	y	2	y	0	y	2	y	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

Company name

James Cowper Kreston

Address

The White Building

1-4 Cumberland Place

Post town

Southampton

County/Region

Postcode

S O 1 5 2 N P

Country

DX

Telephone

023 8022 1222

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

600 - continuation page

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voluntary winding up

1 Company details

Company number	<input type="text"/>	
Company name in full	<input type="text"/>	

2 Liquidator's name

Full forename(s)	<input type="text"/>	
Surname	<input type="text"/>	

3 Liquidator's address

Building name/number	<input type="text"/>	
Street	<input type="text"/>	
	<input type="text"/>	
Post town	<input type="text"/>	
County/Region	<input type="text"/>	
Postcode	<input type="text"/>	
Country	<input type="text"/>	

4 Liquidator's email address or telephone number ^①

Email address	<input type="text"/>	^① You must give an email address or telephone number. All information on this form will appear on the public record.
Telephone number	<input type="text"/>	

5 Insolvency practitioner number

Insolvency practitioner number	<input type="text"/>	