



**Notice of Individual Person
with Significant Control**

Company Name: **ACCOUNTANTS PAYMENT PLAN LTD**

Company Number: **08709946**



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Notification Details

Date that person became **13/04/2016**
registrable:

Name: **MISS AMANDA JANE ROSE**

Service address recorded as Company's registered office

Country/State Usually **ENGLAND**
Resident:

Date of Birth: ****/09/1961**

Nationality: **BRITISH**

Nature of control

The person has the right to exercise, or actually exercises, significant influence or control over 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