



Companies House

CS01 (ef)

Confirmation Statement

Company Name: **IN SAFE HANDS COMMUNITY CARE SERVICES LIMITED**

Company Number: **08978392**



Received for filing in Electronic Format on the: **06/04/2020**

X92EO0KQ

Company Name: **IN SAFE HANDS COMMUNITY CARE SERVICES LIMITED**

Company Number: **08978392**

Confirmation **04/04/2020**

Statement date:

Sic Codes: **88990**

Principal activity description: **Other social work activities without accommodation n.e.c.**

Statement of Capital (Share Capital)

Class of Shares:	ORDINARY	Number allotted	100
Currency:	GBP	Aggregate nominal value:	100

Prescribed particulars

THE ORDINARY SHARES OF THE COMPANY WILL HAVE FULL VOTING RIGHTS, ONE VOTE PER SHARE, TOTAL PRIVILEGES IN RESPECT OF DIVIDENDS AND WILL BE PERMITTED TO PARTICIPATE IN ANY DISTRIBUTION (INCLUDING ON WINDING UP). ANY DIVIDEND PAYABLE ON THE ORDINARY SHARE SHALL BE DECIDED BY THE COMPANY IN GENERAL MEETING (IF AND SO FAR AS, THE PROFITS OF THE COMPANY JUSTIFY SUCH PAYMENT) AND SUCH DIVIDENDS MAY VARY FROM TIME TO TIME AND MAY BE PAYABLE ON ANY CLASS OF SHARE OR SHARES AS MAY BE. THE AMOUNT OF ANY DIVIDEND (IF ANY) PAYABLE ON SUCH SHARES IS AT THE DISCRETION OF THE COMPANY. ANY SUCH DIVIDEND SHALL BE PAYABLE BY THE COMPANY AT ANY TIME OR TIMES AS MAY BE DECIDED BY THE COMPANY.

Statement of Capital (Totals)

Currency:	GBP	Total number of shares:	100
		Total aggregate nominal value:	100
		Total aggregate amount unpaid:	0

Full details of Shareholders

The details below relate to individuals/corporate bodies that were shareholders during the review period or that had ceased to be shareholders since the date of the previous confirmation statement.

Shareholder information for a non-traded company as at the confirmation statement date is shown below

Shareholding 1: **100 ORDINARY shares held as at the date of this confirmation statement**

Name: **JOANNE FISHER**

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager,
Judicial Factor