



Change of Particulars for Director

Company Name: **WEST COUNTRY OCCUPATIONAL THERAPY LIMITED**

Company Number: **10567371**



Received for filing in Electronic Format on the: **30/01/2023**

XBW9W50W

Details Prior to Change

Original name: **MISS JENNIFER ROLFE**

Date of Birth: ****/03/1985**

New Details

Date of Change: **30/01/2023**

Service address recorded as Company's registered office

Country/State Usually Resident **ENGLAND**

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