

## **Appointment of Director**

Company Name: INDEPENDENT HEALTH AND CARE PROVIDERS (NI)

Company Number: NI034416

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## **New Appointment Details**

Date of Appointment: 18/05/2021

Name: GILBERT YATES

The company confirms that the person named has consented to act as a director.

Service address recorded as Company's registered office

Country/State Usually

Resident:

**NORTHERN IRELAND** 

Date of Birth:

\*\*/01/1974

Nationality:

**NORTHERN IRISH** 

Occupation:

**DIRECTOR** 

## **Authorisation**

	Authorisation
Authenticated	
This form was authorised by one of the	e following:
Director, Secretary, Person Authorised, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor	