



## **Appointment of Director**

X A F 6 1 8 0 F

# Company Name:**BROKEN CROSS WIND FARM LIMITED**Company Number:**SC579904**

Received for filing in Electronic Format on the: **15/10/2021** 

### New Appointment Details

Date of Appointment: 13/10/2021

Name: JOHN FRANK MILLIGAN

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<br>Resident: | SCOTLAND   |
|------------------------------------|------------|
| Date of Birth:                     | **/11/1981 |
| Nationality:                       | BRITISH    |
| Occupation:                        | DIRECTOR   |
|                                    |            |

#### **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