



## **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 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