



Appointment of Director

Company Name: **TORBAY HOSPITAL LEAGUE OF FRIENDS SHOP LIMITED**

Company Number: **03024219**



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New Appointment Details

Date of Appointment: **31/01/2020**

Name: **KATHRYN NANETTE WESTAWAY**

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

Service Address: **22 SEVERN ROAD
TORQUAY
DEVON
ENGLAND
TQ2 7LY**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/08/1966**

Nationality: **BRITISH**

Occupation: **OFFICE ADMINISTRATOR**

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