

600

Notice of appointment of liquidator in a  
members' or creditors' voluntary winding up



Companies House

TUESDAY

SAT



\*A6XRZA88\*

A17 16/01/2018 #26  
COMPANIES HOUSE

\*A6X2F7YH\*  
A10 06/01/2018 #410  
COMPANIES HOUSE

1 Company details

Company number 08922069

Company name in full DFC WALSALL LIMITED

→ Filling in this form

Please complete in typescript or in  
bold black capitals.

2 Liquidator's name

Full forename(s) GARETH

Surname PRINCE

3 Liquidator's address

Building name/number 3RD FLOOR

Street 1 TEMPLE POINT

1 TEMPLE RD

Post town BIRMINGHAM

County/Region

Postcode B2 5L9

Country

4 Liquidator's email address or telephone number <sup>①</sup>

Email address birmingham@begbies-traynor.com

Telephone number 0121 200 8750

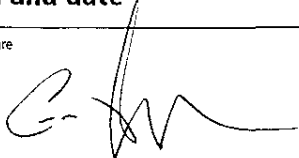
<sup>①</sup> You must give an email address or  
telephone number. All information  
on this form will appear on the  
public record.

5 Insolvency practitioner number

Number 16090

600

# Notice of appointment of liquidator in a members' or creditors' voluntary winding up

|                        |  |  |
|------------------------|--|--|
| <b>6</b>               | <b>Liquidator's name<sup>①</sup></b>   |  |
| Full forename(s)       | MARK   |  |
| Surname                | MALONE   |  |
| <b>7</b>               | <b>Liquidator's address<sup>②</sup></b>  |  |
| Building name/number   | 3RD FLOOR, TEMPLE POINT  |  |
| Street                 | 1 TEMPLE ROW   |  |
|                        | <del>TEMPLE POINT</del>  |  |
| Post town              | BIRMINGHAM   |  |
| County/Region          |  |  |
| Postcode               | B2 5LG   |  |
| Country                |  |  |
| <b>8</b>               | <b>Liquidator's email address or telephone number<sup>③</sup></b>  |  |
| Email address          | birmingham@begbies-traynor.com   |  |
| Telephone number       | 0121 205 5150  |  |
| <b>9</b>               | <b>Insolvency practitioner number</b>  |  |
| Number                 | 15970  |  |
| <b>10</b>              | <b>Statement of appointment</b>  |  |
|                        | I confirm the appointment of the liquidator(s) on  |  |
| Date                   | <div> <div>d</div> <div>0</div> <div>d</div> <div>3</div> <div>m</div> <div>0</div> <div>m</div> <div>1</div> <div>y</div> <div>2</div> <div>y</div> <div>0</div> <div>y</div> <div>1</div> <div>y</div> <div>8</div> </div> |  |
| <b>11</b>              | <b>Appointment details</b>   |  |
|                        | The appointment was made by<br>(Tick one)<br><input checked="" type="checkbox"/> Company<br><input type="checkbox"/> Creditors   |  |
| <b>12</b>              | <b>Type of liquidation</b>   |  |
|                        | Tick to confirm the liquidation type<br><input type="checkbox"/> Members<br><input checked="" type="checkbox"/> Creditors  |  |
| <b>13</b>              | <b>Sign and date</b>   |  |
| Liquidator's signature | Signature<br><div> <div>X</div>  <div>X</div> </div>  |  |
| Signature date         | <div> <div>d</div> <div>0</div> <div>d</div> <div>4</div> <div>m</div> <div>0</div> <div>m</div> <div>1</div> <div>y</div> <div>2</div> <div>y</div> <div>0</div> <div>y</div> <div>1</div> <div>y</div> <div>8</div> </div> |  |

**① Other Liquidator's details**  
Use this section to tell us about another liquidator.

**② Other Liquidator's details**  
Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.

**③ You must give an email address or telephone number. All information on this form will appear on the public record.**

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## Presenter information

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

Contact name LAUREA MALKIN

Company name BECBIES TRAYNCE

(CENTRAL) LLP

Address 3RD FLOOR, 1 TEMPLE

AVENUE, TEMPLE ROW

Post town BIRMINGHAM

County/Region

Postcode B 2 5 2 G

Country

DX

Telephone 0121 200 3150



## Checklist

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- ☐ The company name and number match the information held on the public Register.
- ☐ You have signed and dated the form.



## Important information

All information on this form will appear on the public record.



## Where to send

You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:

The Registrar of Companies, Companies House,  
Crown Way, Cardiff, Wales, CF14 3UZ.  
DX 33050 Cardiff.



## Further information

For further information please see the guidance notes on the website at [www.gov.uk/companieshouse](http://www.gov.uk/companieshouse) or email [enquiries@companieshouse.gov.uk](mailto:enquiries@companieshouse.gov.uk)

This form is available in an alternative format. Please visit the forms page on the website at [www.gov.uk/companieshouse](http://www.gov.uk/companieshouse)