



Appointment of Director

Company Name: **METHODIST INSURANCE PLC**

Company Number: **00006369**



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XA0137Q0

New Appointment Details

Date of Appointment: **03/03/2021**

Name: **MRS LOUISE CHRISTINE WILKINS**

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

Service Address: **BENEFACT HOUSE 2000 PIONEER AVENUE
GLOUCESTER BUSINESS PARK, BROCKWORTH
GLOUCESTER
UNITED KINGDOM
GL3 4AW**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: ****/09/1983**

Nationality: **BRITISH**

Occupation: **LEGAL EXECUTIVE**

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