In accordance with section 109 of the Insolvency Act 1986

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Companies House

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

SATURDAY



A07 11/04/2020 COMPANIES HOUSE

#3

2 Liqu	0 3 4 0 1 9 8 RRINGDON PROPERTY TRUST LIMITED idator's name	→ Filling in this form Please complete in typescript or in bold black capitals.	
2 Liqu	idator's name	bold black capitals.	
			
		<u></u>	
Full forename(s) SEA			
	N KENNETH		
Surname CRC	OSTON	_	
3 Liqui	idator's address		
Building name/number 30			
Street FINS	SBURY SQUARE	_	
		_	
Post town LON	IDON	_	
County/Region		_	
Postcode E	C 2 A 1 A G		
Country ENG	BLAND	_	
4 Liqui	Liquidator's email address or telephone number • O You must give an email a		
Email address		telephone number. All informatio on this form will appear on the	
Telephone number 020	7865 2760	public record.	
5 Inso	lvency practitioner number		
Number 8	9 3 0		

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6	Liquidator's name ⁰		
Full forename(s)		Other Liquidator's details Use this section to tell us about	
Surname		another liquidator.	
7	Liquidator's address 0	· · · 	
Building name/numbe		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.	
Street			
Post town			
County/Region			
Postcode			
Country			
8 Liquidator's email address or telephone number €		9 You must give an email address or	
Email address		telephone number. All information on this form will appear on the	
Telephone number		public record.	
9	Insolvency practitioner number		
Number			
10	Statement of appointment		
	I confirm the appointment of the liquidator(s) on		
Date	$\begin{bmatrix} d & 0 \end{bmatrix} \begin{bmatrix} d & 1 \end{bmatrix} \begin{bmatrix} m & 0 \end{bmatrix} \begin{bmatrix} m & 4 \end{bmatrix} \begin{bmatrix} y & 2 \end{bmatrix} \begin{bmatrix} y & 0 \end{bmatrix} \begin{bmatrix} y & 2 \end{bmatrix} \begin{bmatrix} y & 0 \end{bmatrix}$		
11	Appointment details		
	The appointment was made by (Tick one)		
	☑ Company		
42	Type of liquidation		
12	Type of liquidation		
	Tick to confirm the liquidation type Members		
	☐ Creditors		
13	Sign and date		
Liquidator's signature	X SA-	×	
 Signature date	$\begin{bmatrix} 1 \\ 0 \end{bmatrix} \begin{bmatrix} d \\ 3 \end{bmatrix} \begin{bmatrix} m \\ 0 \end{bmatrix} \begin{bmatrix} m \\ 4 \end{bmatrix} \begin{bmatrix} y \\ 2 \end{bmatrix} \begin{bmatrix} y \\ 0 \end{bmatrix} \begin{bmatrix} y \\ 2 \end{bmatrix} \begin{bmatrix} y \\ 0 \end{bmatrix}$		

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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 Colin Morris Company name Grant Thornton UK LLP Address 30 Finsbury Square London County/Region Postcode G С 2 Ε England DX Telephone 020 7865 2760 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.

f Further information

For further information please see the guidance notes on the website at www.gov.uk/companieshouse or email 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