In accordance with section 109 of the Insolvency Act 1986

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

For further information, please refer to our guidance at www.gov.uk/companieshouse

1	Company details	
Company number	0 0 7 3 2 4 3 2	→ Filling in this form Please complete in typescript or in
Company name in full	G.V.S. Swimming Pools Limited	bold black capitals.
2	Liquidator's name	
Full forename(s)	Andrew	
Surname	Fender	
3	Liquidator's address	
Building name/number	Sanderling House, Springbrook Lane	
Street	Earlswood	
Post town	Solihull	
County/Region		
Postcode	B 9 4 5 S G	
Country		
4	Liquidator's email address or telephone number •	• You must give an email address or
Email address	info@sanderlings.co.uk	telephone number. All information on this form will appear on the
Telephone number	01564 700 052	public record.
5	Insolvency practitioner number	
Number	6 8 9 8	

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

6	Liquid	dato	r's na	ame		•								
Full forename(s)														Other Liquidator's details Use this section to tell us about another liquidator
Surname				and draw desired differences										1
7	Liquid	dato	r's ac	ldre	ss	•		*****						 id.
Building		***************************************												
name/number		***************************************										*****		 Other Liquidator's details
Street		4									***************************************			 Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Post town								************						
County/Region														
Postcode														 _
Country	1	1		·				L						
8	Liqui	dato	r's er	mail	ado	dress	or	tele	pho	ne	num	ber	•	
Email address														You must give an email address or telephone number. All information on this form will
Telephone number		******									<u> </u>			 appear on the public record.
9	Insol	venc	y pra	ctit	ione	er nu	ımb	er						
Number									1					
10	State	men	t of	appo	oint	men	t	<u> </u>						
	l conf	irm th	he app	point	men	t of t	he lic	quida	ator(s) on	ı			
Date	0	5		0	1		2	0	2	1				
11	Appo	intn	nent	deta	ails									
	(Tick of	Compa	ors	was	made	e by								

112	Type of liquidation	
	Members Creditors	
	Tick to confirm the liquidation type	
13	Sign and date	
Liquidator's signature	X Signature	
Signature date	0 7 0 1 2 0 2 1	