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 9 0 8 3 3 3 | → Filling in this form Please complete in typescript or in |
| Company name in full | Rapport Housing and Care | bold black capitals. |
| | | |
| 2 | Liquidator's name | |
| Full forename(s) | Dane | 196 |
| Surname | O'Hara | and the second s |
| 3 | Liquidator's address | annonis ang manasana ini na ara- |
| Building name/number | Leonard Curtis | |
| Street | 5th Floor | |
| | Grove House | |
| Post town | 248a Marylebone Road | |
| County/Region | London | |
| Postcode | N W 1 6 B B | |
| Country | | |
| 4 | Liquidator's email address or telephone number 🍑 | • You must give an email address or |
| Email address | · | telephone number. All information on this form will appear on the |
| Telephone number | 020 7535 7000 | public record. |
| 5 | Insolvency practitioner number | |
| Number | 2 8 5 5 0 | |
| | | |
| | | |
| | | |
| | | |
| | | |
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| | | |

600 Notice of appointment of liquidator in a members' or creditors' voluntary winding up Liquidator's name • Full forename(s) Neil Other Liquidator's details Use this section to tell us about Surname **Bennett** another liquidator. Liquidator's address @ Building name/number | Leonard Curtis Other Liquidator's details Use this section to tell us about Street 5th Floor another liquidator. Use the continuation page to tell us about **Grove House** more than two liquidators. Post town 248a Marylebone Road County/Region London Postcode $N \mid W$ 1 6 В В Country Liquidator's email address or telephone number 9 8 1 You must give an email address or telephone number. All information Email address on this form will appear on the public record. Telephone number 020 7535 7000 9 Insolvency practitioner number Number 9 0 8 3 10 Statement of appointment I confirm the appointment of the liquidator(s) on ^d2 ^d9 <u>"0 ["1</u> | ^y 2 | ^y 0 | ^y 2 | ^y 4 Date Appointment details 11 The appointment was made by (Tick one) Company Creditors 12 Type of liquidation Tick to confirm the liquidation type Members Creditors 13 Sign and date Signature Liquidator's signature X X y, y (, Signature date

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

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 | Andrew Brough |
|---------------|----------------------|
| Сотрапу пате | Leonard Curtis |
| | |
| Address | 5th Floor |
| | Grove House |
| | 248a Marylebone Road |
| Post town | London |
| County/Region | |
| Postcode | N W 1 6 B B |
| Country | |
| DX | |
| Telephone | 020 7535 7000 |

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.

7 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

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600 - continuation page

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

| 1 | Company details | |
|--|--|---|
| Company number | 0 0 9 0 8 3 3 3 | |
| Company name in full | Rapport Housing and Care | |
| Company hame in ran | Inapport riousing and Care | |
| 2.0 | Liquidator's name | |
| Full forename(s) | | |
| Surname | | |
| 3 | Liquidator's address | |
| Building name/number | | 751 |
| Street | | |
| | | |
| Post town | | |
| County/Region | | |
| Postcode | | |
| Country | | |
| 4 | Liquidator's email address or telephone number Output Description: | I |
| Email address | • | • You must give an email address or |
| Telephone number | | telephone number. All information on this form will appear on the |
| | | public record. |
| E | Incolvency practitioner number | |
| | Insolvency practitioner number | |
| 5 Insolvency practitioner number | Insolvency practitioner number | |
| Insolvency practitioner | Insolvency practitioner number | |
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