



## Appointment of Director

Company Name: **MICROBIOLOGY SOCIETY**

Company Number: **01039582**



Received for filing in Electronic Format on the: **10/04/2019**

**X834177K**

### **New Appointment Details**

Date of Appointment: **01/01/2019**

Name: **PROFESSOR DEIRDRE DEVINE**

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

Service Address: **DIVISION OF ORAL BIOLOGY SCHOOL OF DENTISTRY  
UNIVERSITY OF LEEDS  
LEEDS  
ENGLAND  
LS9 7TF**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **\*\*/10/1961**

Nationality: **BRITISH**

Occupation: **PROFESSOR**

## **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**