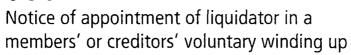
In accordance with section 109 of the Insolvency Act 1986 600





MONDAY



A07

19/10/2020 MPANIES HOL #30

| | | COMPANIES HOUSE | | | | | |
|----------------------|-------------------------------------------------------------|----------------------------------------------------------------------------------|--|--|--|--|--|
| 1 | Company details | | | | | | |
| Company number | 0 1 1 7 0 0 4 9 | → Filling in this form Please complete in typescript or in bold black capitals. | | | | | |
| Company name in full | Teddesley Leisure Limited | | | | | | |
| | | | | | | | |
| 2 | Liquidator's name | | | | | | |
| Full forename(s) | Paul | | | | | | |
| Surname | Harding | | | | | | |
| 3 | Liquidator's address | | | | | | |
| Building name/number | Suite 1, Canon Court East | | | | | | |
| Street | Abbey Lawn, Abbey Foregate | | | | | | |
| | | | | | | | |
| Post town | Shrewsbury | | | | | | |
| County/Region | Shropshire | | | | | | |
| Postcode | S Y 2 5 D E | | | | | | |
| Country | | | | | | | |
| 4 | Liquidator's email address or telephone number ⁹ | • You must give an email address or | | | | | |
| Email address | emma costello Otrigroup olg | telephone number. All information on this form will appear on the public record. | | | | | |
| Telephone number | 01743 233603 | | | | | | |
| 5 | Insolvency practitioner number | | | | | | |
| Number | 6 3 1 0 | | | | | | |
| | | | | | | | |

| | | | | | | | | | | | | |
|------------------|---------|----------------|--------|-------|------------|-------|------------|----------------|----|---------------------------------------|------------------|-----------------------------------------------------------------------------------------------------------------------------|
| | 600 | | | | | | | | | | | |
| | Notice | ∍ of | anno | ointn | nent | of | iaui | date | or | in a members | s' or creditors' | |
| | voluni | | | | | | . 40. | | • | | | |
| | VOIGIII | cu, y | ***** | ۵۵ | ч р | | | | | | | |
| 6 | Liqui | dato | or's i | name | 2 | • | | | | | | |
| Full forename(s) | | | | | | | | | | | | Other Liquidator's details Use this section to tell us |
| Surname | - | | | | <u> </u> | | | | | _ | ·- ·- ·- ·- ·- | about another liquidator |
| 7 | Liqui | dato | or's a | ddr | 255 | • |) | | | · · · · · · · · · · · · · · · · · · · | | |
| Building | | | | | | | | | | | | • Other Liquidate of details |
| name/number | | | | | | | | | | | | Other Liquidator's details |
| Street | | | | | | | · - | - , | | | | Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators. |
| Post town | | | | | | | | | | | | 7 |
| County/Region | | <u>-</u> | | | _ | | | | | | | † |
| Postcode | | | | | | | | | | | | _ |
| Country | | | | | | | | | | | | |
| 8 | Liqui | dato | or's e | emai | ad | dres | s or | tele | ep | hone number | • | |
| Email address | | | | | | | | | | | | You must give an email address |
| | Ĺ | | | | | | | | | | | or telephone number. All |
| | | | | | | | | | | | | information on this form will appear on the |
| Telephone number | | | | | | | | | | | | public record. |
| 9 | insol | vend | cy pr | actit | ion | er n | umb | er | | | | |
| Number | | | | | | | | | | | | |
| 10 | State | mer | nt of | app | oint | mei | nt | | | | | |
| | 1 | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | i conf | firm t | the ap | poin | tmer | it of | the li | quid | at | or(s) on | | 1 |
| Date | 2 | 0 | | 0 | 8 | | 2 | 0 | 9 | 20 | | |
| 11 | Appo | intr | neni | det | ails | | | | | | | |
| | l . | Comp Credit | ors | t was | mad | e by | | | | | | |

| 12 | Type of liquidation | |
|------------------------------|--------------------------------------|-------|
| | ✓ Members □ Creditors | |
| | Tick to confirm the liquidation type | · |
| 13 Liquidator's signature | X X | |
| Signature date | Signature 2 0 2 0 2 0 | 1 |
| | | |