Companies House

AP01 (ef)

Appointment of Director

X4ENAPFD

Company Name: **DYSLEXIA INSTITUTE LIMITED**

Company Number: **01179975**

Received for filing in Electronic Format on the: **27/08/2015**

New Appointment Details

Date of Appointment: **13/08/2015**

Name: **MR ANDY GREGSON**

Consented to Act: **YES**

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: **01/06/1963**

Nationality: **BRITISH**

Occupation: **MANAGEMENT CONSULTANT**

Former Names:

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.