



Companies House

CS01 (ef)

Confirmation Statement

Company Name: **LIVING CARE PHARMACY (EAST LEEDS) LIMITED**

Company Number: **02287319**



Received for filing in Electronic Format on the: **21/07/2023**

XC88170R

Company Name: **LIVING CARE PHARMACY (EAST LEEDS) LIMITED**

Company Number: **02287319**

Confirmation **21/07/2023**

Statement date:

Full details of Shareholders

The details below relate to individuals/corporate bodies that were shareholders during the review period or that had ceased to be shareholders since the date of the previous confirmation statement.

Shareholder information for a non-traded company as at the confirmation statement date is shown below

Shareholding 1:	4 transferred on 2023-03-16
Name:	0 ORDINARY shares held as at the date of this confirmation statement LIVING CARE (LEEDS) LTD
Shareholding 2:	4 ORDINARY shares held as at the date of this confirmation statement
Name:	PHARMACY PLUS HEALTH LIMITED

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager,
Judicial Factor