



## Change of Particulars for Director

Company Name: **SPECIALITY CARE LIMITED**

Company Number: **02787609**



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### Details Prior to Change

Original name: **MR TREVOR MICHAEL TORRINGTON**

Date of Birth: **\*\*/07/1961**

### New Details

Date of Change: **05/01/2022**

Service address recorded as Company's registered office

The usual residential address of this person has not changed

## **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