



Appointment of Director

Company Name: **PERCEPTIVE ECLINICAL LIMITED**

Company Number: **03264836**



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New Appointment Details

Date of Appointment: **03/04/2023**

Name: **ANDREW MCLEOD RUTHERFORD**

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

Service Address: **CASTLE WHARF 4 CANAL STREET
NOTTINGHAM
ENGLAND
UNITED KINGDOM
NG1 7EH**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: ****/01/1968**

Nationality: **BRITISH**

Occupation: **CHIEF FINANCIAL OFFICER**

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