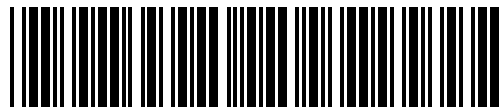




Appointment of Director

Company Name: **MOORCROFT EQUINE REHABILITATION CENTRE**

Company Number: **03789963**



Received for filing in Electronic Format on the: **14/02/2022**

XAXUFAOA

New Appointment Details

Date of Appointment: **12/02/2022**

Name: **MRS JESSICA HILLICKS**

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

Service Address: **1 WHEATSHEAF CLOSE 1 WHEATSHEAF CLOSE
HORSHAM
ENGLAND
RH12 5TH**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/03/1963**

Nationality: **BRITISH**

Occupation: **PROJECT LEADER**

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