



**Notice of Individual Person  
with Significant Control**

Company Name: **ALLIED CARE (MENTAL HEALTH) LIMITED**

Company Number: **04165416**



Received for filing in Electronic Format on the: **14/02/2024**

XCWVCKMZ

## Notification Details

Date that person became **20/12/2023**  
registrable:

Name: **MR GARETH O'CONNELL**

Service Address: **FORRESTBROOK HOUSE, 11A FORESTBROOK ROAD  
ROSTREVOR  
NEWRY  
NORTHERN IRELAND  
BT34 3BT**

Country/State Usually  
Resident: **IRELAND**

Date of Birth: **\*\*/11/1971**

Nationality: **IRISH**

## **Nature of control**

The person holds, directly or indirectly, 75% or more of the shares in the company.

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## **Register entry date**

Register entry date      **20/12/2023**

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## **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