



Appointment of Director

Company Name: **COMMUNITY HEALTH PARTNERSHIPS LIMITED**

Company Number: **04220587**



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New Appointment Details

Date of Appointment: **01/03/2019**

Name: **MRS CHARAANJIT KAUR YOGESHBHAI PATEL**

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

Service Address: **17 MARYON MEWS
LONDON
ENGLAND
NW3 2PU**

Country/State Usually
Resident: **ENGLAND**

Date of Birth: ****/06/1954**

Nationality: **BRITISH**

Occupation: **COMPANY DIRECTOR**

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