



Confirmation Statement

Company Name: **Psychological Medicine Consultants Limited**

Company Number: **04323538**



Received for filing in Electronic Format on the: **21/11/2016**

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Company Name: **Psychological Medicine Consultants Limited**

Company Number: **04323538**

Confirmation **15/11/2016**

Statement date:

Statement of Capital (Share Capital)

Class of Shares:	ORDINARY	Number allotted	2
Currency:	GBP	Aggregate nominal value:	2
Prescribed particulars			
FULL VOTING RIGHTS			

Statement of Capital (Totals)

Currency:	GBP	Total number of shares:	2
		Total aggregate nominal value:	2
		Total aggregate amount unpaid:	0

Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became **06/04/2016**
registrable:

Name: **MRS CAROLYNN TURNER**

Service Address: **ABBAY CLOSE FARM SKEEBY
RICHMOND
NORTH YORKSHIRE
ENGLAND
DL10 5EE**

Country/State Usually
Resident: **ENGLAND**

Date of Birth: ****/06/1963**

Nationality: **BRITISH**

Nature of control

The person holds, directly or indirectly, more than 25% but not more than 50% of the shares in the company.

The person holds, directly or indirectly, more than 25% but not more than 50% of the voting rights in the company.

The person has the right, directly or indirectly, to appoint or remove a majority of the board of directors of the company.

Notification Details

Date that person became **06/04/2016**
registrable:

Name: **DR MARK ANDREW TURNER**

Service Address: **ABBAY CLOSE FARM SKEEBY
RICHMOND
NORTH YORKSHIRE
ENGLAND
DL10 5EE**

Country/State Usually
Resident: **ENGLAND**

Date of Birth: ****/09/1965**

Nationality: **BRITISH**

Nature of control

The person holds, directly or indirectly, more than 25% but not more than 50% of the shares in the company.

The person holds, directly or indirectly, more than 25% but not more than 50% of the voting rights in the company.

The person has the right, directly or indirectly, to appoint or remove a majority of the board of directors of the company.

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager,
Judicial Factor