

Confirmation Statement

Company Name: SWANTON CARE & COMMUNITY (AUTISM NORTH) LIMITED

Company Number: 04536431

XBGHMIPI.

Received for filing in Electronic Format on the: 10/11/2022

Company Name: SWANTON CARE & COMMUNITY (AUTISM NORTH) LIMITED

Company Number: 04536431

Confirmation **14/10/2022**

Statement date:

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

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End of Electronically filed document for Company Number: