



Appointment of Director

Company Name: **ALPHA PLUS EDUCATION LIMITED**

Company Number: **05290340**



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New Appointment Details

Date of Appointment: **23/08/2023**

Name: **MR ANDREW DAVID PARSONS**

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

Service Address: **THISTLE HOUSE 4 BURNABY STREET
HAMILTON HM11
BERMUDA**

Country/State Usually Resident: **BERMUDA**

Date of Birth: ****/07/1959**

Nationality: **BERMUDIAN**

Occupation: **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