



Appointment of Director

Company Name: **CUMBRIA CEREBRAL PALSY**

Company Number: **05386416**



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XBUXMVMW

New Appointment Details

Date of Appointment: **03/01/2023**

Name: **MRS SUZANNE HALSALL**

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

Service Address: **22 SPENCER SPENCER STREET
CARLISLE
UNITED KINGDOM
CA1 1BG**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: ****/09/1961**

Nationality: **BRITISH**

Occupation: **NHS**

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