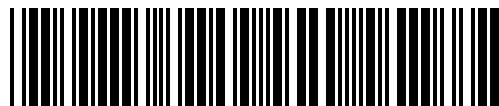




## Appointment of Director

Company Name: **Capital Hospitals (Issuer) Plc**

Company Number: **05462494**



Received for filing in Electronic Format on the: **07/07/2023**

XC79NWLM

### New Appointment Details

Date of Appointment: **27/06/2023**

Name: **GERRY CONNELLY**

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

Service Address: **4 CHERRY WALK  
MOTHERWELL  
NORTH LANARKSHIRE  
SCOTLAND  
SCOTLAND  
ML1 2QP**

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

Date of Birth: **\*\*/11/1960**

Nationality: **BRITISH**

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**