



## Appointment of Director

Company Name: **Form Workplace Solutions Limited**

Company Number: **05781567**



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### **New Appointment Details**

Date of Appointment: **30/09/2020**

Name: **MR CHRISTOPHER JOHN HARDING**

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

Service Address: **FORM HOUSE YORK WAY, LANCASTER ROAD  
CRESSEX BUSINESS PARK  
HIGH WYCOMBE  
BUCKINGHAMSHIRE  
UNITED KINGDOM  
HP12 3PY**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **\*\*/01/1987**

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**