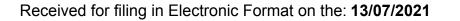




Confirmation Statement

Company Name: WEST NORFOLK HEALTH LIMITED Company Number: 05872101



Company Name: WEST NORFOLK HEALTH LIMITED

Company Number: 05872101

Confirmation **11/07/2021**

Statement date:



XA8MR43C

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