



Appointment of Director

Company Name: **THE ACADEMY OF MEDICAL EDUCATORS**

Company Number: **05965178**



Received for filing in Electronic Format on the: **30/04/2020**

X9438IDD

New Appointment Details

Date of Appointment: **28/04/2020**

Name: **DR JAMES ASHCROFT**

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

Service Address: **63 KINGSTON STREET KINGSTON STREET
CAMBRIDGE
ENGLAND
CB1 2NU**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/02/1993**

Nationality: **BRITISH**

Occupation: **DOCTOR**

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