



Appointment of Director

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

Company Number: **05965178**



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XA3RSQN4

New Appointment Details

Date of Appointment: **20/04/2021**

Name: **DR RATNA MAKKER**

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

Service Address: **DEPT OF ANAESTHESIA, WATFORD GENERAL HOSPITAL
VICARAGE ROAD
WATFORD
ENGLAND
WD18 0HB**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/09/1964**

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