



Confirmation Statement

Company Name: **ST DAVIDS DENTAL CARE LIMITED**

Company Number: **06110712**



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X61IT4PK

Company Name: **ST DAVIDS DENTAL CARE LIMITED**

Company Number: **06110712**

Confirmation **16/02/2017**

Statement date:

Statement of Capital (Share Capital)

Class of Shares:	ORDINARY	Number allotted	200
	A	Aggregate nominal value:	200
	SHARES		

Currency: **GBP**

Prescribed particulars

FULL RIGHTS

Class of Shares:	ORDINARY	Number allotted	25
	B	Aggregate nominal value:	25
	SHARES		

Currency: **GBP**

Prescribed particulars

FULL RIGHTS

Class of Shares:	ORDINARY	Number allotted	200
	C	Aggregate nominal value:	200
	SHARES		

Currency: **GBP**

Prescribed particulars

FULL RIGHTS

Class of Shares:	ORDINARY	Number allotted	200
	D	Aggregate nominal value:	200
	SHARES		

Currency: **GBP**

Prescribed particulars

FULL RIGHTS

Statement of Capital (Totals)

Currency:	GBP	Total number of shares:	625
		Total aggregate nominal value:	625

Total aggregate amount **0**
unpaid:

Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became registrable: **01/07/2016**

Name: **MRS SHEILA JANE JOHNSON**

Service Address: **ASHDALE THE FRAICH
FISHGUARD
WALES
SA65 9QJ**

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

Date of Birth: ****/11/1951**

Nationality: **BRITISH**

Nature of control

The person holds, directly or indirectly, 75% or more of the shares in the company.

The person holds, directly or indirectly, 75% or more of the voting rights in the company.

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