



Appointment of Director

Company Name: **OPEN HANDS PROJECT (SHEFFIELD)**

Company Number: **06368608**



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New Appointment Details

Date of Appointment: **01/07/2020**

Name: **MR PETER IBISON**

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

Service Address: **49 CORTWORTH ROAD
SHEFFIELD
ENGLAND
S11 9LN**

Country/State Usually
Resident: **ENGLAND**

Date of Birth: ****/10/1962**

Nationality: **BRITISH**

Occupation: **HEAD OF PRICING**

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