



## Change of Particulars for Director

Company Name: **HEALTH AND WELLBEING TRUST LIMITED**

Company Number: **06399506**



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XCESTLPF

### Details Prior to Change

Original name: **MS CAROLINE OLIVIA REED**

Date of Birth: **\*\*/09/1962**

### New Details

Date of Change: **12/10/2023**

Service address recorded as Company's registered office

## **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