

## **Appointment of Director**

Company Name: **E-ACT**Company Number: **06526376** 



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## **New Appointment Details**

Date of Appointment: 05/12/2023

Name: DR LEILA WALKER

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

Service address recorded as Company's registered office

Country/State Usually

**ENGLAND** 

Resident:

Date of Birth: \*\*/03/1971

Nationality: BRITISH

Occupation: EDUCATIONALIST

## **Authorisation**

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