



Appointment of Director

Company Name: **PTSD RESOLUTION LIMITED**

Company Number: **06884539**



Received for filing in Electronic Format on the: **16/10/2019**

X8G70L0R

New Appointment Details

Date of Appointment: **26/04/2018**

Name: **MRS LORNE COLIN CAMPBELL MITCHELL**

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

Service Address: **CHANTRY HOUSE 22 UPPERTON ROAD
EASTBOURNE
EAST SUSSEX
UNITED KINGDOM
BN21 1BF**

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

Date of Birth: ****/05/1959**

Nationality: **BRITISH**

Occupation: **TRUSTEE**

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