



**Change of individual person with  
significant control (PSC) details**

Company Name: **FAMILY FOSTER CARE (REGIONAL) LIMITED**

Company Number: **07150099**



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**Details Prior to Change**

Name: **MR COLIN WATKINS**

Date of Birth: **\*\*/09/1958**

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**New Details**

Date of Change: **07/08/2020**

New Service Address: **TY GARDD DRUIDSTONE ROAD  
OLD ST. MELLONS  
CARDIFF  
WALES  
CF3 6XD**

New Country/State  
Usually Resident: **WALES**

## Register entry date

Register entry date      **01/09/2020**

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### 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