

## **Appointment of Director**

Company Name: **EXPRESSIONS ACADEMY OF PERFORMING ARTS LIMITED** 

Company Number: 07328980

Received for filing in Electronic Format on the: 01/08/2023

## **New Appointment Details**

Date of Appointment: 01/08/2023

MRS SANDRA COOPER Name:

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: \*\*/11/1958

Nationality: **BRITISH** 

Occupation: DIRECTOR

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