



Companies House

AP01 (ef)

Appointment of Director



X30S7COQ

Company Name: **STROKE CARE**

Company Number: **07393327**

Received for filing in Electronic Format on the: **01/02/2014**

New Appointment Details

Date of Appointment: **20/01/2014**

Name: **MS CHAYANNE SERVILLE**

Consented to Act: **YES**

Service Address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: **14/09/1973**

Nationality: **BRITISH**

Occupation: **CIVIL SERVANT**

Former Names:

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.