



## Appointment of Director

Company Name: **ROYAL SOCIETY OF TROPICAL MEDICINE AND HYGIENE**

Company Number: **07941827**



Received for filing in Electronic Format on the: **14/10/2021**

XAF3E7Z5

### New Appointment Details

Date of Appointment: **07/10/2021**

Name: **PROFESSOR OLANISUN OLUFEMI ADEWOLE**

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 Resident: **NIGERIA**

Date of Birth: **\*\*/07/1971**

Nationality: **NIGERIAN**

Occupation: **MEDICAL PRACTITIONER**

## **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**