



**Notice of Individual Person  
with Significant Control**

Company Name: **Mills Medical Services Limited**

Company Number: **08258692**



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## Notification Details

Date that person became **08/10/2020**  
registrable:

Name: **MS CLAIRE ELIZABETH RYAN**

Service Address: **14 MONARCH DRIVE KINGSMEAD  
NORTHWICH  
CHESHIRE  
UNITED KINGDOM  
CW9 8TH**

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

Date of Birth: **\*\*/05/1976**

Nationality: **BRITISH**

## **Nature of control**

The person has the right to exercise, or actually exercises, significant influence or control over the company.

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## **Register entry date**

Register entry date      **08/10/2020**

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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