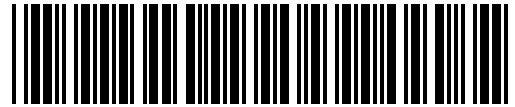




Termination of a Director Appointment

Company Name: **COMMUNITY INCLUSIVE TRUST**

Company Number: **09071623**



Received for filing in Electronic Format on the: **07/06/2022**

XB5OE8R5

Termination Details

Date of termination: **26/05/2022**

Name: **MS KATHLEEN WEEKES**

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Liquidator, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor.