



Appointment of Director

Company Name: **ULSTER NEW ZEALAND TRUST - THE**

Company Number: **NI024513**



Received for filing in Electronic Format on the: **09/03/2022**

XAZF5IT6

New Appointment Details

Date of Appointment: **01/03/2022**

Name: **MRS MARY ELIZABETH MADDEN**

The company confirms that the person named has consented to act as a director.

Service Address: **118A LISBURN ROAD
GLENNAVY
CRUMLIN
NORTHERN IRELAND
BT29 4NY**

Country/State Usually Resident: **NORTHERN IRELAND**

Date of Birth: ****/07/1953**

Nationality: **BRITISH**

Occupation: **RETIRED CIVIL SERVANT**

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