



## Appointment of Director

Company Name: **THE BLACK BOX TRUST**

Company Number: **NI058233**



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### New Appointment Details

Date of Appointment: **16/12/2021**

Name: **MR PIERRE BOITEL-GILL**

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

Service Address: **13 MY LADYS MILE  
HOLYWOOD  
NORTHERN IRELAND  
BT18 9EW**

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

Date of Birth: **\*\*/12/1959**

Nationality: **BRITISH**

Occupation: **COMPANY DIRECTOR**

## **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**