



Appointment of Director

Company Name: **DISABLED AND CARERS INFORMATION CENTRE ASSOCIATION**

Company Number: **SC160754**



Received for filing in Electronic Format on the: **28/06/2023**

XC6NT3TV

New Appointment Details

Date of Appointment: **20/06/2023**

Name: **MISS SOPHIE KENNEDY**

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: **SCOTLAND**

Date of Birth: ****/01/2000**

Nationality: **BRITISH**

Occupation: **STUDENT ENGAGEMENT**

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