



Appointment of Director

Company Name: **GLASGOW LOCAL MEDICAL COMMITTEE LIMITED**

Company Number: **SC410734**



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New Appointment Details

Date of Appointment: **15/04/2019**

Name: **DR MICHAEL RENNICK**

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

Service Address: **CASTLEMILK GROUP PRACTICE CASTLEMILK HEALTH
CENTRE
71 DOUGRIE DRIVE
GLASGOW
UNITED KINGDOM
G45 9SW**

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

Date of Birth: ****/12/1970**

Nationality: **BRITISH**

Occupation: **GENERAL PRACTITIONER**

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