



Companies House

CS01_(ef)

Confirmation Statement

Company Name: **ESSEX CARES LIMITED**

Company Number: **06723149**



X9G94QFU

Received for filing in Electronic Format on the: **23/10/2020**

Company Name: **ESSEX CARES LIMITED**

Company Number: **06723149**

Confirmation **14/10/2020**

Statement date:

Sic Codes: **87200**

88990

Principal activity description: **Residential care activities for learning difficulties, mental health and substance abuse**

Other social work activities without accommodation n.e.c.

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager,
Judicial Factor