



## Appointment of Director

Company Name: **SOUTHERN ADOLESCENT CARE SERVICES LTD**

Company Number: **07093561**



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### New Appointment Details

Date of Appointment: **11/05/2021**

Name: **MR COLIN JAMES ANDERTON**

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

Service Address: **MAYBROOK HOUSE QUEENSWAY  
HALESOWEN  
ENGLAND  
B63 4AH**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **\*\*/06/1977**

Nationality: **ENGLISH**

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**