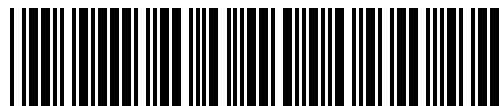




## Appointment of Director

Company Name: **SHERBORNE AREA SCHOOLS' TRUST**

Company Number: **08130468**



Received for filing in Electronic Format on the: **19/05/2023**

XC3U5RBU

### New Appointment Details

Date of Appointment: **20/03/2023**

Name: **MR ALAN DOUGLAS MORRIS**

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

Service Address: **ST ALDHELM'S HOUSE, THE GRYPHON SCHOOL  
BRISTOL ROAD  
SHERBORNE  
DORSET  
ENGLAND  
DT9 4EQ**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **\*\*/09/1956**

Nationality: **BRITISH**

Occupation: **ACCOUNTANT**

## **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**