



Appointment of Director

Company Name: **TRIBAL SPORTS NUTRITION LIMITED**

Company Number: **08249901**



Received for filing in Electronic Format on the: **17/12/2018**

X7KYHKTF

New Appointment Details

Date of Appointment: **13/12/2018**

Name: **MS KARIN KATHLEEN GIBBERD**

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

Service Address: **UNIT 20 NEWCOURT BARTON CLYST ROAD
TOPSHAM
EXETER
ENGLAND
EX3 0DB**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/06/1964**

Nationality: **BRITISH**

Occupation: **PHYSIOTHERAPIST**

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