



Appointment of Director

Company Name: **NATIONAL ASSOCIATION OF PRIMARY CARE LIMITED**

Company Number: **11973226**



Received for filing in Electronic Format on the: **05/10/2022**

XBDYDZII

New Appointment Details

Date of Appointment: **21/09/2022**

Name: **DR MINESH PATEL**

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

Service address recorded as Company's registered office

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

Date of Birth: ****/09/1967**

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