Companies House

AP01 (ef)

Appointment of Director

X4KYCCHL

Company Name: **ALL WALES AMBULANCE SERVICES LIMITED**

Company Number: **03876322**

Received for filing in Electronic Format on the: **26/11/2015**

New Appointment Details

Date of Appointment: **28/10/2015**

Name: **MRS RIA LLEWELLYN-REES**

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

Service Address:
1 ARCH COTTAGES
YSTRADGYNLAIS
SWANSEA
WALES
SA9 1SD

Country/State Usually Resident: **WALES**

Date of Birth: ****/05/1985**

Nationality: **BRITISH**

Occupation: **COMPANY DIRECTOR**

Former Names:

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.