



Confirmation Statement

Company Name: **FOOTPRINTS WOMENS CENTRE**

Company Number: **NI036140**



Received for filing in Electronic Format on the: **25/05/2017**

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Company Name: **FOOTPRINTS WOMENS CENTRE**

Company Number: **NI036140**

Confirmation **10/05/2017**

Statement date:

Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became registrable: **11/10/2016**

Name: **MRS MARY MCNEILL**

Service Address: **84A COLINMILL
DUNMURRY
BELFAST
NORTHERN IRELAND
BT17 0AR**

Country/State Usually Resident: **NORTHERN IRELAND**

Date of Birth: ****/04/1949**

Nationality: **IRISH**

Nature of control

The person has the right to exercise, or actually exercises, significant influence or control over the company.

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager,
Judicial Factor