



Termination of a Director Appointment

Company Name: **NORTHERN IRELAND CHEST, HEART & STROKE**

Company Number: **NI018889**



Received for filing in Electronic Format on the: **25/11/2016**

X5KJCF2H

Termination Details

Date of termination: **28/09/2016**

Name: **MRS ANN HAYES**

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Liquidator, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor.

