



Change of Particulars for Director

Company Name: **ACADEMY FOR ADULT AND CHILDHOOD TRAUMA LIMITED**

Company Number: **10619135**



Received for filing in Electronic Format on the: **21/01/2021**

X9W08L3L

Details Prior to Change

Original name: **MISS SHILPA WALIA**

Date of Birth: ****/09/1973**

New Details

Date of Change: **15/01/2021**

Service address recorded as Company's registered office

The usual residential address of this person has not changed

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