Companies House

CS01 (ef)

Confirmation Statement

Company Name: **NORTHWEST DISABILITY GYMNASTICS CENTRE OF EXCELLENCE LTD**
Company Number: **10085024**

Received for filing in Electronic Format on the: **12/04/2017**

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Company Name:	**NORTHWEST DISABILITY GYMNASTICS CENTRE OF EXCELLENCE LTD**
Company Number:	**10085024**
Confirmation Statement date:	**23/03/2017**
Sic Codes:	**93110**
Principal activity description:	**Operation of sports facilities**

Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became registrable: **06/04/2016**

Name: **MRS MAXINE ANN QUINLIVAN-GRECH**

Service address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/01/1969**

Nationality: **BRITISH**

Nature of control

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

Notification Details

Date that person became registrable: **06/04/2016**

Name: **MR CLAUDIO MICHAEL GRECH**

Service address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/02/1960**

Nationality: **BRITISH**

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