



Appointment of Director

Company Name: **TOWNFIELD PHARMACY LIMITED**

Company Number: **04847565**



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New Appointment Details

Date of Appointment: **27/04/2023**

Name: **ZUBAIR MALIK**

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

Service Address: **AMS ACCOUNTANTS MEDICAL 9 PORTLAND STREET
FLOOR 2
MANCHESTER
ENGLAND
M1 3BE**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/06/1974**

Nationality: **BRITISH**

Occupation: **DIRECTOR**

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