



Companies House

# CS01<sub>(ef)</sub>

## Confirmation Statement

Company Name: **PORT ISAAC HEALTHCARE LIMITED**

Company Number: **06730440**



Received for filing in Electronic Format on the: **25/10/2021**

XAFTULQA

Company Name: **PORT ISAAC HEALTHCARE LIMITED**

Company Number: **06730440**

Confirmation Statement date: **22/10/2021**

Sic Codes: **86210**

Principal activity description: **General medical practice activities**

## Statement of Capital (Share Capital)

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<b>Class of Shares:</b>	<b>ORDINARY</b>	Number allotted	<b>5</b>
Currency:	<b>GBP</b>	Aggregate nominal value:	<b>5</b>

Prescribed particulars

**EACH SHARE IS ENTITLED TO ONE VOTE IN ANY CIRCUMSTANCES**

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## Statement of Capital (Totals)

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Currency:	<b>GBP</b>	Total number of shares:	<b>5</b>
		Total aggregate nominal value:	<b>5</b>
		Total aggregate amount	<b>0</b>
		unpaid:	

## Full details of Shareholders

The details below relate to individuals/corporate bodies that were shareholders during the review period or that had ceased to be shareholders since the date of the previous confirmation statement.

Shareholder information for a non-traded company as at the confirmation statement date is shown below

Shareholding 1: **1 ORDINARY shares held as at the date of this confirmation statement**  
Name: **SANDRA BARFIELD**

Shareholding 2: **1 ORDINARY shares held as at the date of this confirmation statement**  
Name: **MALCOLM NIALl MCKENDRICK**

Shareholding 3: **1 ORDINARY shares held as at the date of this confirmation statement**  
Name: **BETH KIRSTY MCCARRON**

Shareholding 4: **1 ORDINARY shares held as at the date of this confirmation statement**  
Name: **NICHOLAS CHRISTOF MASCHLER HEARLE**

Shareholding 5: **1 ORDINARY shares held as at the date of this confirmation statement**  
Name: **WILLIAM DEAN MARSHALL**

## **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