



Termination of a Director Appointment

Company Name: **TRUEDEN DISABILITY CARE LIMITED**

Company Number: **07316161**



Received for filing in Electronic Format on the: **28/04/2014**

X36RPHIO

Termination Details

Date of termination: **31/03/2014**

Name: **MR DAVID CECIL LEWIS**

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.