



Termination of a Director Appointment

Company Name: **"FIVE TOWNS PLUS" HOSPICE FUND LIMITED(THE)**

Company Number: **01797810**



Received for filing in Electronic Format on the: **19/09/2025**

XEBF2HR5

Termination Details

Date of termination: **11/09/2025**

Name: **MR ALASTAIR NEIL 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.