



**Statement of satisfaction
in full or in part of charge**

Company Name: **SW HEALTHCARE PARTNERSHIP LIMITED**

Company Number: **05367837**



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XF6ZBMBV

Details of Satisfaction

Charge created (or property acquired) on or after 6th April 2013.

Charge code: **0536 7837 0001**

Satisfaction of
charge: **In full**

Details of the person delivering this statement and their interest in the charge

Name: **ALISON FRY**

Address: **WINCHESTER HOUSE DEANE GATE AVENUE TAUNTON ENGLAND TA1
2UH**

Interest: **DIRECTOR**

Authentication of Form

This form was authorised by: **a person with an interest in the registration of the charge.**