



Companies House

CS01 (ef)

Confirmation Statement

Company Name: **IMPACT FOSTER CARE LTD**

Company Number: **15923766**



Received for filing in Electronic Format on the: **20/08/2025**

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Company Name: **IMPACT FOSTER CARE LTD**

Company Number: **15923766**

Confirmation **19/08/2025**

Statement date:

The company confirms that its intended future activities are lawful.

Statement of Capital (Share Capital)

Class of Shares:	ORD	Number allotted	100
Currency:	GBP	Aggregate nominal value:	100

Prescribed particulars

THE COMPANY MAY ISSUE SHARES WITH SUCH RIGHTS OR RESTRICTIONS AS MAY BE DETERMINED BY ORDINARY RESOLUTION. ALL SHARES HAVE EQUAL VOTING RIGHTS. THE COMPANY MAY BY ORDINARY RESOLUTION DECLARE DIVIDENDS, AND THE DIRECTORS MAY DECIDE TO PAY INTERIM DIVIDENDS. ALL DIVIDENDS WILL BE DIVIDED ON PROPORTION OF SHAREHOLDING. THE COMPANY MAY ISSUE SHARES WHICH ARE TO BE REDEEMED, OR ARE LIABLE TO BE REDEEMED AT THE OPTION OF THE COMPANY OR THE HOLDER, AND THE DIRECTORS MAY DETERMINE THE TERMS, CONDITIONS AND MANNER OF REDEMPTION OF ANY SUCH SHARES

Statement of Capital (Totals)

Currency:	GBP	Total number of shares:	100
		Total aggregate nominal value:	100
		Total aggregate amount	0
		unpaid:	

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