



## Termination of a Director Appointment

Company Name: **STRATFORD-ON-AVON MUSIC FESTIVAL**

Company Number: **03164482**



Received for filing in Electronic Format on the: **08/08/2019**

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### Termination Details

Date of termination: **24/04/2019**

Name: **MR PETER LESLIE HOLLIDAY**

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### **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.