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Notice of appointment of liquidator in a members' or creditors' voluntary winding up



Companies House

For further information, please refer to
our guidance at
www.gov.uk/companieshouse

1	Company details	
Company number	0 9 6 1 7 6 9 4	→ Filling in this form Please complete in typescript or in bold black capitals.
Company name in full	Circus Lonco Limited	
	T/A Circus London	
2	Liquidator's name	
Full forename(s)	Andrew	
Surname	Little	
3	Liquidator's address	
Building name/number	Ground Floor	
Street	Portland House	
Post town	54 New Bridge Street West	
County/Region	Newcastle upon Tyne	
Postcode	N E 1 8 A P	
Country		
4	Liquidator's email address or telephone number ^①	① You must give an email address or telephone number. All information on this form will appear on the public record.
Email address	andrew.little@btguk.com	
Telephone number	0191 2699820	
5	Insolvency practitioner number	
Number	9 6 6 8	

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6 Liquidator's name ^①

Full forename(s) Gillian Margaret

Surname Sayburn

① Other Liquidator's details
Use this section to tell us about another liquidator.

7 Liquidator's address ^②

Building name/number Ground Floor

Street Portland House

Post town 54 New Bridge Street West

County/Region Newcastle upon Tyne

Postcode N E 1 8 A P

Country

② Other Liquidator's details
Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.

8 Liquidator's email address or telephone number ^③

Email address Gillian.Sayburn@btguk.com

Telephone number 0191 2699820

③ You must give an email address or telephone number. All information on this form will appear on the public record.

9 Insolvency practitioner number

Number 1 0 8 3 0

10 Statement of appointment

I confirm the appointment of the liquidator(s) on

Date d 0 4 m 0 7 y 2 0 y 2 4

11 Appointment details

The appointment was made by
(Tick one)☐ Company☒ Creditors

12 Type of liquidation

Tick to confirm the liquidation type

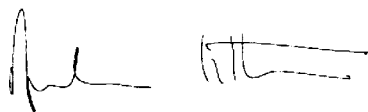
☐ Members☒ Creditors

13 Sign and date

Liquidator's signature

Signature

X



X

Signature date

d 0 8 m 0 7 y 2 0 y 2 4

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Presenter information

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

Contact name **Rheanne Chalmers**

Company name **Begbies Traynor (Central) LLP**

Address **Ground Floor**

Portland House

Post town **54 New Bridge Street West**

County/Region **Newcastle upon Tyne**

Postcode **N E 1 8 A P**

Country

DX

Telephone **0191 2699820**

Checklist

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- ☐ The company name and number match the information held on the public Register.
- ☐ You have signed and dated the form.

Important information

All information on this form will appear on the public record.

Where to send

You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:

The Registrar of Companies, Companies House,
Crown Way, Cardiff, Wales, CF14 3UZ.
DX 33050 Cardiff.

Further information

For further information please see the guidance notes on the website at www.gov.uk/companieshouse or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.gov.uk/companieshouse