AP01

Appointment of director



You can use the WebFiling service to file this form online Please go to www companieshouse gov uk

What this form is for You may use this form to appoint an individual as a director

What this form is NOT for You cannot use the form to please use form AP02 'Appo' of corporate director'



06/07/2010 **COMPANIES HOUSE**

Company details 2058 Filling in this form Company number Please complete in typescript or in HEALTHCALL MESICAL HOLDINGS Company name in full bold black capitals. All fields are mandatory unless LIMITES specified or indicated by * Date of director's appointment Date of appointment 0 New director's details • Former name(s) Please provide any previous names Title* MR which have been used for business purposes in the past 20 years. Full forename(s) JOHN JOSEPH Married women do not need to give former names unless previously used Surname IVERS for business purposes Former name(s) • Continue in section 6 if required Country/State of KINGSOM Ocuntry/State of residence UNITED residence @ This is in respect of your usual RRITISH residential address as stated in Nationality Section 4a 7962 ^d2 ^d Date of birth 8 Business occupation If you have a business occupation, **Business occupation** please enter here. If you do not, COMPANY MRECTOR (if any) 9 please leave blank New director's service address @ Please complete your service address below You must also complete your usual O Service address residential address in Section 4a This is the address that will appear on the public record. This does not BRooKBuilding name/number have to be your usual residential address Street BROOK MANOR SANDON Please state 'The Company's Registered Office' if your service MALION ROAN address is recorded in the company's CHELMSFORD Post town register of directors as the company's registered office County/Region If you provide your residential address here it will appear on the Postcode public record Country UNITED KINGSOM

AP01 Appointment of director

signature X Shu how Significant of which organ of signing has member s	g filed on behalf paea (SE) please nd insert details the SE the persor ership
New director's signature X	paea (SE) please nd insert details the SE the person ership
Authorising signature Syname Under either section	_
	on 270 or 274 of
This form may be signed and authorised by Director •, Secretary, Person authorised•, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity commission receiver and manager, CIC manager, Judicial factor	
Additional former names (continued from Section 3)	
Former names Additional former Use this space to er additional names.	

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 DAVIS COLLISCON
Company name NESTOR HEALTHCARE
GROUP PLC
Address DEACONSTIED COURT
BEACONLIFIED ROAD
POST TOWN HATTIELD
County/Region HEXTFORINGHIRE
Postcode ALIO8HU
COUNTRY UNITED KINDOM
DX
Telephone 0/707 25563/
Chacklist

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 provided a business occupation if you have one.
- You have provided a correct date of birth
- ☐ You have completed the date of appointment
- ☐ You have completed the nationality box in Section 3
- You have provided both the service address and the usual residential address
- Addresses must be a physical location They cannot be a PO Box number (unless part of a full service address), DX or LP (Legal Post in Scotland) number
- You have included all former names used for business purposes over the last 20 years
- ☐ You have enclosed a relevant section 243 application if applying for this at the same time as completing this form
- The new director has signed the form
- You have provided an authorising signature

Important information

Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses.

Where to send

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

For companies registered in England and Wales The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ DX 33050 Cardiff

For companies registered in Scotland The Registrar of Companies, Companies House, Fourth floor, Edinburgh Quay 2, 139 Fountainbridge, Edinburgh, Scotland, EH3 9FF DX ED235 Edinburgh 1 or LP - 4 Edinburgh 2 (Legal Post)

For companies registered in Northern Ireland The Registrar of Companies, Companies House, Second Floor, The Linenhall, 32-38 Linenhall Street, Belfast, Northern Ireland, BT2 8BG DX 481 N R Belfast 1

Section 243 exemption

if you are applying for, or have been granted a section 243 exemption, please post this whole form to the different postal address below The Registrar of Companies, PO Box 4082, Cardiff, CF14 3WE

Further information

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

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