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

X What this form is NOT fo You cannot use the form to a corporate director To do please use form APO2 'Appi of corporate director'



A55 19/12/2009 COMPANIES HOUSE

| 1 | Company details | | |
|------------------------------|---|---|--|
| Company number | 0 5 7 2 3 9 7 7 | → Filling in this form Please complete in typescript or in bold black capitals | |
| Company name in full | ADI Finance 1 Limited | | |
| | | All fields are mandatory unless specified or indicated by * | |
| 2 | Date of director's appointment | | |
| Date of appointment | $\begin{bmatrix} 0 \\ 3 \end{bmatrix} \begin{bmatrix} 1 \\ 0 \end{bmatrix} \begin{bmatrix} 1 \\ 1 \end{bmatrix} \begin{bmatrix} 1 \\ 1 \end{bmatrix} \begin{bmatrix} 1 \\ 2 \end{bmatrix} \begin{bmatrix} 1 \\ 0 \end{bmatrix}$ | | |
| 3 | New director's details | • Former name(s) | |
| Title* | Mr | Please provide any previous names which have been used for business purposes in the past 20 years Married women do not need to give former names unless previously used | |
| Full forename(s) | Renaud | | |
| Surname | Faucher | | |
| Former name(s) • | | for business purposes Continue in section 6 if required | |
| Country/State of residence | Canada | Country/State of residence This is in respect of your usual residential address as stated in Section 4a Business occupation If you have a business occupation, please enter here. If you do not, please leave blank | |
| Nationality | Canadian | | |
| Date of birth | ¹ 2 ¹ 9 ¹ 0 ¹¹ 5 1 1 1 1 1 1 1 1 1 | | |
| Business occupation (if any) | Director, Investments Manager | | |
| 4 | New director's service address © | | |
| | Please complete your service address below You must also complete your usual residential address in Section 4a | O Service address This is the address that will appear | |
| Building name/number | The Compass Centre | on the public record This does not have to be your usual residential address Please state 'The Company's | |
| Street | Nelson Road | | |
| | | Registered Office' if your service address is recorded in the company's | |
| Post town | Hounslow | register of directors as the company's registered office If you provide your residential address here it will appear on the public record | |
| County/Region | Middlesex | | |
| Postcode | T W 6 2 G W | | |
| Country | England | | |

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| 5 | Signatures | | |
|--------------------------|---|---|--|
| | I consent to act as director of the above named company | ⊕ Societas Europaea | |
| New director's signature | Signature X | If the form is being filed on behalf of a Societas Europaea (SE) please delete director' and insert details of which organ of the SE the person signing has membership Person authorised Under either section 270 or 274 of the Companies Act 2006 | |
| Authorising signature | Signature X | | |
| | 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 | | |
| 6 | Additional former names (continued from Section 3) | | |
| Former names • | | Additional former names Use this space to enter any additional names | |
| | | : : ! | |

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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 Sandy-lee Connolly |
| Company name BAA Limited |
| |
| Address The Compass Centre |
| Nelson Road, Hounslow |
| |
| Post town Middlesex |
| County/Regron |
| Postcode T W 6 2 G W |
| Country England |
| DX |
| ^{Telephone} 0208 757 1657 |
| ✓ 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 provided a business occupation if you have one |

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, First Floor, Waterfront Plaza, 8 Laganbank Road, Belfast, Northern Ireland, BT1 3BS 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

☐ You have completed the date of appointment

☐ You have provided both the service address and the

☐ Addresses must be a physical location They cannot

 You have included all former names used for business purposes over the last 20 years

You have enclosed a relevant section 243

The new director has signed the formYou have provided an authorising signature

be a PO Box number (unless part of a full service address), DX or LP (Legal Post in Scotland) number

application if applying for this at the same time as

You have completed the nationality box in

usual residential address

completing this form

Section 3