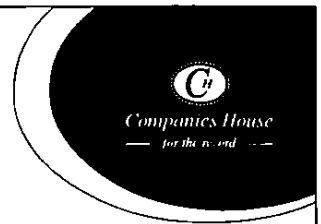


AP01

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 ap-
point a corporate director To do this,
please use form AP02 'Appointi-
ment of corporate director'

THURSDAY



A16 14/04/2011 248
COMPANIES HOUSE

1 Company details

Company number 05891911

Company name in full THATCHAM LIMITED

→ **Filling in this form**
Please complete in typescript or in
bold black capitals

All fields are mandatory unless
specified or indicated by *

2 Date of director's appointment

Date of appointment d 0 4 m 0 4 y 2 0 y 1 1

3 New director's details

Title* MR

Full forename(s) PETER

Surname SHAW

Former name(s) ①

Country/State of
residence ② UK

Nationality BRITISH

Date of birth d 0 9 m 0 6 y 1 9 y 5 9

Business occupation
(if any) ③ MANAGEMENT

① Former name(s)

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
for business purposes

Continue in section 6 if required

② Country/State of residence

This is in respect of your usual
residential address as stated in
Section 4a

③ Business occupation

If you have a business occupation,
please enter here If you do not,
please leave blank

4 New director's service address ④

Please complete your service address below You must also complete your usual
residential address in Section 4a

Building name/number MOTOR INSURANCE REPAIR RESEARCH CENTRE

Street COLTHROP WAY

Post town THATCHAM

County/Region BERKSHIRE

Postcode R G 1 9 4 N R

Country UK

④ Service address

This is the address that will appear
on the public record This does not
have to be your usual residential
address

Please state 'The Company's
Registered Office' if your service
address is recorded in the company's
register of directors as the
company's registered office



If you provide your residential
address here it will appear on the
public record

AP01

Appointment of director

5

Signatures

I consent to act as director of the above named company		
New director's signature	Signature X 	X
Authorising signature	Signature X 	X
This form may be signed and authorised by Director ❶, Secretary, Person authorised ❷, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity commission receiver and manager, CIC manager, Judicial factor		

❶ Societas Europaea

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

❷ Person authorised

Under either section 270 or 274 of the Companies Act 2006

6

Additional former names (continued from Section 3)

Former names ❸		❸ Additional former names Use this space to enter any additional names

AP01

Appointment of director

**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

Company name **MOTOR INSURANCE REPAIR****RESEARCH CENTRE**Address **COLTHROP WAY**Post town **THATCHAM**County/Region **BERKSHIRE**

Postcode

R G 1 9 4 N R

Country **UK**

DX

Telephone **01635 868855****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
- ☐ 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