

# OS AP01

## Appointment of director of an overseas company

BLUEPRINT

OneWorld

☒ **What this form is for**  
You may use this form to appoint  
an individual as a director of an  
overseas company

☐ **What this form is NOT for**  
You cannot use the form to appoint  
a corporate director of an overseas  
company. To do this, please use  
OS AP02 'Appointment of corporate  
director of an overseas company'.



LD3 \*L25JW0AJ\* #64  
04/04/2013  
COMPANIES HOUSE

### 1 Overseas company details

Company number

Company name in full  
or alternative name as  
registered in the UK

→ **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

### 3 New director's details

Title\*

Full forename(s)

Surname

Former name(s) <sup>①</sup>

Country/State of  
residence <sup>②</sup>

Nationality

Date of birth

Business occupation  
(if any) <sup>③</sup>

**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 8 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 <sup>④</sup>

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

Building name/number

Street

Post town

County/Region

Postcode

Country

**④ Service address**  
This is the address that will appear  
on the public record. This does not  
have to be your usual residential  
address.  
  
If you provide your residential  
address here it will appear on the  
public record

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**5 Director's authority**

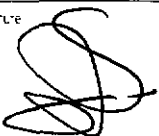
|                                                                           |                                                                                     |                                                                                                                                                                                                                                                                                                                                         |
|---------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Please enter the extent of your authority as director Please tick one box |                                                                                     | <p>① If you have indicated that the extent of your authority is limited, please provide a brief description of the limited authority in the box below</p> <p>② If you have indicated that you are not authorised to act alone but only jointly, please enter the name(s) of the person(s) with whom you are authorised to act below</p> |
| Extent of authority                                                       | <input type="checkbox"/> Limited ①<br><input checked="" type="checkbox"/> Unlimited |                                                                                                                                                                                                                                                                                                                                         |
| Description of limited authority, if applicable                           | Are you authorised to act alone or jointly? Please tick one box                     |                                                                                                                                                                                                                                                                                                                                         |
|                                                                           | <input checked="" type="checkbox"/> Alone<br><input type="checkbox"/> Jointly ②     |                                                                                                                                                                                                                                                                                                                                         |
| If applicable, name(s) of person(s) with whom you are acting jointly      |                                                                                     |                                                                                                                                                                                                                                                                                                                                         |

**6 UK establishments**

A return must be delivered in respect of any alteration to the company particulars by each UK establishment. If, however, a company has more than one UK establishment, it may deliver only one form in respect of all those UK establishments, provided it completes the table below

| UK establishment name | Registration number |  |  |  |  |  |  |  |
|-----------------------|---------------------|--|--|--|--|--|--|--|
|                       |                     |  |  |  |  |  |  |  |
|                       |                     |  |  |  |  |  |  |  |
|                       |                     |  |  |  |  |  |  |  |
|                       |                     |  |  |  |  |  |  |  |

**7 Signature**

|           |                                                                                                                                                                                                                                                                            |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Signature | <p>Signature </p> <p><b>X</b> For and on behalf of <b>X</b><br/>Barcosec Limited</p> <p>This form may be signed and authorised by<br/>Director, Secretary, Permanent representative</p> |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**8 Additional former name(s) (continued from Section 3)**

|                  |                                                                                   |
|------------------|-----------------------------------------------------------------------------------|
| Former name(s) ③ | <p>③ Additional former names<br/>Use this space to enter any additional names</p> |
|                  |                                                                                   |
|                  |                                                                                   |
|                  |                                                                                   |
|                  |                                                                                   |
|                  |                                                                                   |
|                  |                                                                                   |
|                  |                                                                                   |

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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

Company name Alexander Ludbrook-Miles

Address Barclays Corporate Secretariat

1 Churchill Place

Post town London

Country/Region

Postcode

E C 4 S H P

Country

United Kingdom

DX

Telephone



### Checklist

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following

- ☐ The company name and number as registered in the UK match the information held on the public Register
- ☐ You have completed the date of appointment
- ☐ You have included all former names used for business purposes over the last 20 years.
- ☐ You have completed the nationality box in Section 3
- ☐ You have provided a correct date of birth
- ☐ You have provided a business occupation if there is one
- ☐ 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 enclosed a relevant higher protection application if applying for this at the same time as completing this form
- ☐ You have entered the extent of the director's authority in Section 6
- ☐ You have completed Section 6, if applicable
- ☐ You have signed the form



### 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

#### England and Wales

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

#### 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)

#### Northern Ireland

The Registrar of Companies, Companies House,  
Second Floor, The Linenhall, 32-38 Linenhall Street,  
Belfast, Northern Ireland, BT2 8BG  
DX 481 NR Belfast 1

#### Higher protection

If you are applying for, or have been granted, higher protection, 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](http://www.companieshouse.gov.uk) or email [enquiries@companieshouse.gov.uk](mailto: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](http://www.companieshouse.gov.uk)