In accordance with Section 1046 of the Companies Act 2006 & Regulation 13 of the Overseas Companies Regulations 2009

# **OS** AP01

## Appointment of director of an overseas company



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
You cannot use the form
a corporate director of a
company To do this, plea
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director of an overseas of



A43 19/01/2012 COMPANIES HOUSE

#184

1	Overseas company details	OMPANIES HOUSE				
Company number  Company name in full or alternative name as	F C 0 2 7 4 2 1  ICAP Services No 1	Filling in this form Please complete in typescript or in bold black capitals All fields are mandatory unless				
registered in the UK		specified or indicated by *				
2	Date of director's appointment					
Date of appointment	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$					
3	New director's details					
Title*	Mr	• Former name(s) Please provide any previous names				
Full forename(s)	David	which have been used for business				
Surname	Ireland	purposes in the past 20 years  Married women do not need to give				
Former name(s) •		former names unless previously used for business purposes				
Country/State of residence	England	Continue in Section 8 if required				
Nationality	British	Ocuntry/State of residence This is in respect of your usual				
Date of birth	d 0   d 5   m 1   m 0   y 1   y 9   y 6   y 9	residential address as stated in Section 4a				
Business occupation (if any) <b>©</b>	Director	Business occupation     If you have a business occupation,     please enter here If you do not,     please leave blank				
4	New director's service address •	<del>-</del>				
	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		on the public record This does not have to be your usual residential				
Street	2 Broadgate	address  If you provide your residential				
		address here it will appear on the				
Post town	London					
County/Region						
Postcode	EC2M7UR					
Country	England					

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5	Director's authority	-					-			
	Please enter the extent of your authority as director Please tick one box				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     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					
Extent of authority	☐ Limited <b>①</b>									
	☑ Unlimited									
Description of limited										
authority, if applicable										
	☑ Alone		•							
	☐ Jointly ❷									
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 UK establishment, it may deliver only one form in respect of all those UK establishments, provided it completes the table below	one								
	UK establishment name	Reg	ıstrat	stration number					·····	
	ICAP Services No 1	В	R	0	1	3	3	6	4	
						_				
			_	_	_		<u> </u>		_	
7	Signature		<u> </u> 	<u> </u>		<u> </u>				
Cupatura	Signature									
Signature	X Thursday	X								
	This form may be signed and authorised by Director, Secretary, Parmanent representative									
8	Additional former name(s) (continued from Section 3)									
Former name(s) €			į	Additional former names     Use this space to enter any     additional names						

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#### Presenter information Important information You do not have to give any contact information, but if Please note that all information on this form you do it will help Companies House if there is a query will appear on the public record, apart from on the form. The contact information you give will be information relating to usual residential visible to searchers of the public record addresses Company Secretariat Where to send Company name ICAP plc You may return this form to any Companies House address **England and Wales** 2 Broadgate The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ DX 33050 Cardiff Scotland The Registrar of Companies, Companies House, London Fourth floor, Edinburgh Quay 2, County/Region 139 Fountainbridge, Edinburgh, Scotland, EH3 9FF DX ED235 Edinburgh 1 Postcode or LP - 4 Edinburgh 2 (Legal Post) England Northern Ireland DX The Registrar of Companies, Companies House, Second Floor, The Linenhall, 32-38 Linenhall Street, 020 7000 5786 Belfast, Northern Ireland, BT2 8BG DX 481 NR Belfast 1 Checklist **Higher protection** If you are applying for, or have been granted, We may return forms completed incorrectly or higher protection, please post this whole form to the with information missing different postal address below The Registrar of Companies, PO Box 4082, Please make sure you have remembered the Cardiff, CF14 3WE following The company name and number as registered in the Further information UK match the information held on the public Register You have completed the date of appointment For further information, please see the guidance notes ☐ You have included all former names used for business on the website at www companieshouse gov uk purposes over the last 20 years or email enquiries@companieshouse gov uk ☐ You have completed the nationality box in Section 3 ☐ You have provided a correct date of birth This form is available in an You have provided a business occupation if there is alternative format. Please visit the You have provided both the service address and the forms page on the website at usual residential address ☐ Addresses must be a physical location They cannot www.companieshouse.gov.uk 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

☐ You have entered the extent of the director's

☐ You have completed Section 6, if applicable

completing this form

authority in Section 6

☐ You have signed the form