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 for You cannot use the form to app a corporate director of an overs company. To do this, please use OS AP02 'Appointment of corporative to an overseas companion of the companion of the corporation of



A17 18/06/2014
COMPANIES HOUSE

#240

1	Overseas company details					
Company number	F C 0 2 9 4 3 9	→ Filling in this form Please complete in typescript or in				
Company name in full	The Great-West Life Assurance Company	bold black capitals				
or alternative name as registered in the UK		All fields are mandatory unless specified or indicated by *				
2	Date of director's appointment					
Date of appointment	$\begin{bmatrix} d & 0 \end{bmatrix} \begin{bmatrix} d & 8 \end{bmatrix} \begin{bmatrix} m & 0 \end{bmatrix} \begin{bmatrix} m & 5 \end{bmatrix} \begin{bmatrix} y & 2 \end{bmatrix} \begin{bmatrix} y & 0 \end{bmatrix} \begin{bmatrix} y & 1 \end{bmatrix} \begin{bmatrix} y & 4 \end{bmatrix}$	,				
3	New director's details					
Title*	Mr	• Former name(s) Please provide any previous names				
Full forename(s)	Paul	which have been used for business  purposes in the past 20 years				
Surname	Desmarais III	Married women do not need to give				
Former name(s) •		former names unless previously used for business purposes				
Country/State of residence	Canada	Continue in Section 8 if required				
Nationality	Canadian	Ocountry/State of residence This is in respect of your usual residential address as stated in Section 4a				
Date of birth	<sup>d</sup> 0 <sup>d</sup> 8 <sup>m</sup> 0 <sup>m</sup> 6 <sup>y</sup> 1 <sup>y</sup> 9 <sup>y</sup> 8 <sup>y</sup> 2					
Business occupation (if any) ●	Assistant Vice President	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>©</sup>					
	Please complete your service address below You must also complete your usual residential address in <b>Section 4a</b>	• Service address  This is the address that will appear				
Building name/number	330	on the public record This does not have to be your usual residential address  If you provide your residential				
Street	University Avenue					
		address here it will appear on the public record				
Post town	Toronto	_   public record				
County/Region	Ontario					
Postcode	M 5 G 1 R 8					
Country	Canada					

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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, places.							
Extent of authority	□ Limited <b>①</b>				of your authority is limited, please provide a brief description of the limited authority in the box below					
	☑ Unlimited					dicate	d that	you a	ıre	
Description of limited authority, if applicable			not authorised to act alone but only jointly, please enter the name(s) of the person(s) with whom you are							
	Are you authorised to act alone or jointly? Please tick one box				son(s) sed to			you a	re	
	☑ Alone									
	☐ Jointly <b>®</b>									
If applicable, name(s) of person(s) with whom you are acting jointly										
6	UK establishments		1	-	_					
	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	Regi	stration number							
				_		_	<u>                                     </u>		_	
				 	 	<u> </u>	 		 	
7	Signature		1	ł		<u> </u>	<u>                                     </u>		<u> </u>	
Signature	This form may be signed and authorised by Director Secretary, Bermanent representative	X								
8	Additional former name(s) (continued from Section 3)							•		
Former name(s) •			Additional former names     Use this space to enter any     additional names							

P	resenter information
you do	o not have to give any contact information, but if out will help Companies House if there is a query form. The contact information you give will be to searchers of the public record.
Contact na	Karına Morris
Company	Canada Life Limited
Address	Canada Life Place
<u> </u>	
Post town	Potters Bar
County/Re	gion Hertfordshire
Postcode	E N 6 5 B A
Country	United Kingdom
DX	
Telephone	01707 422736
<b>√</b> 0	hecklist
	ay return forms completed incorrectly or information missing
follow  Th  UK  Yo  Yo  Yo  Yo  An  Helian  Th  Helian  Helian  Th  Helian  Th	e company name and number as registered in the C match the information held on the public Register to have completed the date of appointment on have included all former names used for businessing have completed the nationality box in Section 3 on have provided a correct date of birth on have provided a business occupation if there is the have provided both the service address and the ual residential address didresses must be a physical location. They cannot a PO Box number (unless part of a full service)
	Idress), DX or LP (Legal Post in Scotland) number in have enclosed a relevant higher protection

### 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 N R 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 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 entered the extent of the director's

☐ You have completed Section 6, if applicable

application if applying for this at the same time as

completing this form

authority in Section 6

☐ You have signed the form