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 apply a corporate director of an over company To do this, please use OS APO2 'Appointment of corporate director of an overseas company



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01/07/2015 COMPANIES HOUSE

#135

		COMPANIES HOUSE					
1	Overseas company details						
Company number Company name in full or alternative name as	F C 0 2 9 4 3 9 The Great-West Life Assurance Company	→ 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	$\begin{bmatrix} d & 0 & 0 \end{bmatrix} \begin{bmatrix} d & 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} d & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} d & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} d & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 & 0 \\ 0 & 0 &$						
3	New director's details						
Title*	Mr	• Former name(s)					
Full forename(s)	Claude	Please provide any previous names which have been used for business purposes in the past 20 years Married women do not need to give					
Surname	Genereux						
Former name(s) •	former names unless previously use for business purposes						
Country/State of residence	Canada Continue in Section 8 if require						
Nationality	Canadian	O Country/State of residence This is in respect of your usual					
Date of birth	d 1 d 0 m 0 m 4 y 1 y 9 y 6 y 2	residential address as stated in Section 4a					
Business occupation (if any)	Executive 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 O						
	Please complete your service address below You must also complete your usual residential address in Section 4a	• Service address This is the address that will appear					
Building name/number	751	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					
Street	Victoria Square						
Post town	Montreal						
County/Region	Quebec						
Postcode	H 2 Y 2 J 3						
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, please.						
Extent of authority	☐ Limited ① ☑ Unlimited				of your authority is limited, please provide a brief description of the limited authority in the box below					
	☑ Unlimited				ave in horise	d to a	ct alon	e but	only	
Description of limited authority, if applicable	Are you authorised to act alone or jointly? Please tick one box				please son(s) sed to	with v	whom			
	✓ Alone				<i>,</i>	500 50				
	☐ Jointly ②									
If applicable, name(s) of person(s) with whom you are acting jointly										
6	UK establishments		<u>.</u> 			-				
	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>	<u> </u>			
7	Signature	<u> </u>		1	<u> </u>	·			<u>'</u>	
Signature	Signature X D 3	X								
	This form may be signed and authorised by Director, Secretary, Permanent representative									
8	Additional former name(s) (continued from Section 3)									
Former name(s)			O 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 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	Please note that all information on this form will appear on the public record, apart from information relating to usual residential addresses					
Contact name Karına Morris	☑ Where to send					
Canada Life Limited	You may return this form to any Companies House address					
Canada Life Place	England and Wales The Registrar of Companies, Companies House, Crown Way, Cardiff, Wales, CF14 3UZ DX 33050 Cardiff					
Post town Potters Bar County/Region Hertfordshire Postcode E N 6 5 B A	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)					
United Kingdom DX Telephone 01707 422736	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					
Checklist We may return forms completed incorrectly or with information missing Please make sure you have remembered the	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					
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 You have included all former names used for business purposes over the last 20 years You have completed the nationality box in Section 3	For further information, please see the guidance notes on the website at www.companieshouse.gov.uk or email enquiries@companieshouse.gov.uk					
 ☐ You have provided a correct date of birth ☐ You have provided a business occupation if there is one 	This form is available in an alternative format. Please visit the					
 □ 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 	forms page on the website at www.companieshouse.gov.uk					

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

 $\hfill \square$ You have signed the form