

AP01

Appointment of director



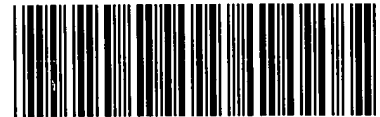
Companies House



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☒ **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 appoint
a corporate director. To do this
please use form AP02 'Appointment
of corporate director'.



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A50SQRE

15/02/2016

#136

COMPANIES HOUSE

1 Company details

Company number **3961902**

Company name in full **EREWASH MENTAL HEALTH
ASSOCIATION 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 **25 01 2016**

3 New director's details

Title* **MRS**

Full forename(s) **AYGUL**

Surname **MACBETH.**

Former name(s) ^① **N/A.**

Country/State of
residence ^② **UK.**

Nationality **RUSSIAN**

Month/year of birth ^③ **X X 03 1975**

Business occupation
(if any) ^④

① Former name(s)

Please provide any previous names
(including maiden or married names)
which have been used for business
purposes in the last 20 years.

Continue in section 7 if required.

② Country/State of residence

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

③ Month and year of birth

Please provide month and year only.
Provide full date of birth in
section 3a.

④ Business occupation

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

4 New director's service address ^⑤

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

Building name/number **COMPANY'S REGISTERED OFFICE**

Street

Post town

County/Region

Postcode

Country

⑤ 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.

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Consent to act as director

Please tick the box to confirm consent.

☒ The company confirms that the person named in section 3 has consented to act as a director of the company named in section 1.

6

Signature

I am signing this form on behalf of the company.

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.

7

Additional former names (continued from Section 3)

Former names ❸

❸ Additional former names

Use this space to enter any additional names.