AP01

Appointment of director



You can use the WebFiling service to file this form online. Please go to www companieshouse gov.uk

- What this form is for You may use this form to appoint an individual as a director
- X What this form is NOT fo What this form is NOT for You cannot use the form to a corporate director. To do please use form APO2 'App of corporate director'



COMPANIES HOUSE

	Company details		
Company number	1263980	Filling in this form Please complete in typescript or in bold black capitals.	
Company name in full	LEWCOMBE FLAT MANAGEMENT		
	COMPANY LTS	All fields are mandatory unless specified or indicated by *	
2	Date of director's appointment		
Date of appointment	1011 1013 12101113		
3	New director's details	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.	
Title*	MS .		
Full forename(s)	BERYL		
Surname	GLASS		
Former name(s) •		Continue in section 6 if required.	
Country/State of residence •	UK	OCOUNTRY/State of residence This is in respect of your usual residential address as stated in Section 4a OBusiness occupation If you have a business occupation, please enter here. If you do not, please leave blank.	
Nationality	BR ITT SH		
Date of birth	121 10 8 11953		
Business occupation (if any)			
4	New director's service address ©		
	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 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	
Building name/number	33		
Street	SANDMOOR COURT		
	HARROGATE ROAD		
Post town	LEEDS	register of directors as the company's registered office. If you provide your residential	
County/Region	YORKSMRE		
Postcode	LSIFFIN	address here it will appear on the public record	
Country			
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APO1 Appointment of director

5	Signatures		
	I consent to act as director of the above named company	O Societas Europaea If the form is being filed on behalf	
New director's signature	X B. Class X	of a Societas Europaea (SE) please delete 'director' and insert details of which organ of the SE the person signing has membership.	
Authorising signature	X V. abrahams X VAL ABRAHAMS	Person authorised Under either section 270 or 274 of the Companies Act 2006.	
	This form may be signed and authorised by: Director • (Secretary, (Person authorised • (Administrator, Administrative Receiver, Receiver, Receiver manager, Charity commission receiver and manager, CIC manager, Judicial factor		
6	Additional former names (continued from Section 3)		
Former names •		Additional former names Use this space to enter any additional names.	