

# OS AP01

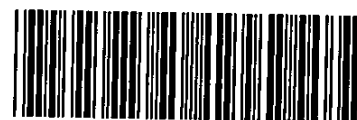
## Appointment of director of an overseas company



☒ **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  
appoint a corporate director of an overseas company. To do this, please  
use OS AP02 'Appointment of corporate director of an overseas company'

WEDNESDAY



A24 \*A1CFQ8ZS\* 04/07/2012 #122  
COMPANIES HOUSE

|  |                         |
|--|-------------------------|
| <b>1 Overseas company details</b>  |                         |
| Company number   | F C 0 2 9 8 8 2         |
| Company name in full or alternative name as registered in the UK   | TFC WINES & SPIRITS INC |
| <p>→ <b>Filling in this form</b><br/>Please complete in typescript or in bold black capitals<br/>All fields are mandatory unless specified or indicated by *</p>   |                         |
| <b>2 Date of director's appointment</b>  |                         |
| Date of appointment  | d0 d1 m0 m1 y2 y0 y1 y2 |
| <b>3 New director's details</b>  |                         |
| Title*   | MR                      |
| Full forename(s)   | ROBERT                  |
| Surname  | WILLIAMS                |
| Former name(s) ①   |                         |
| Country/State of residence ②   | USA                     |
| Nationality  | USA                     |
| Date of birth  | d0 d1 m0 m1 y1 y9 y7 y3 |
| Business occupation (if any) ③   | COMPANY DIRECTOR        |
| <p>① <b>Former name(s)</b><br/>Please provide any previous names which have been used for business purposes in the past 20 years<br/>Married women do not need to give former names unless previously used for business purposes<br/>Continue in Section 8 if required</p> <p>② <b>Country/State of residence</b><br/>This is in respect of your usual residential address as stated in Section 4a</p> <p>③ <b>Business occupation</b><br/>If you have a business occupation, please enter here. If you do not, please leave blank</p> |                         |
| <b>4 New director's service address ④</b>  |                         |
| Please complete your service address below. You must also complete your usual residential address in Section 4a  |                         |
| Building name/number   | SBM & CO                |
| Street   | 117 FENTIMAN ROAD       |
| Post town  | LONDON                  |
| County/Region  |                         |
| Postcode   | S W 8 1 J Z             |
| Country  | ENGLAND                 |
| <p>④ <b>Service address</b><br/>This is the address that will appear on the public record. This does not have to be your usual residential address<br/>If you provide your residential address here it will appear on the public record</p>  |                         |

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### Director's authority

|   |   |   |
|---|---|---|
| Please enter the extent of your authority as director Please tick one box |   | <p>❶ 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</p> <p>❷ 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</p> |
| Extent of authority   | <input type="checkbox"/> Limited ❶                              |   |
|   | <input checked="" type="checkbox"/> Unlimited                   |   |
| Description of limited authority, if applicable                           | Are you authorised to act alone or jointly? Please tick one box |   |
|   | <input checked="" type="checkbox"/> Alone                       |   |
| If applicable, name(s) of person(s) with whom you are acting jointly      | <input type="checkbox"/> Jointly ❷                              |   |
|   |   |   |

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### 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 one UK establishment, it may deliver only one form in respect of all those UK establishments, provided it completes the table below

| UK establishment name | Registration number |
|-----------------------|---------------------|
|                       |                     |
|                       |                     |
|                       |                     |
|                       |                     |

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### Signature

|  |   |   |
|--|---|---|
| Signature  | Signature   | X |
|  |  |   |
| This form may be signed and authorised by<br>Director, Secretary, Permanent representative |   |   |

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### Additional former name(s) (continued from Section 3)

|                  |  |   |
|------------------|--|---|
| Former name(s) ❶ |  | <p>❶ Additional former names<br/>Use this space to enter any additional names</p> |
|                  |  |   |
|                  |  |   |
|                  |  |   |
|                  |  |   |
|                  |  |   |
|                  |  |   |
|                  |  |   |

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**Presenter 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.

Contact name PAULINE B MCALPINE

Company name SBM & CO

Address 117 FENTIMAN ROAD

Post town LONDON

County/Region

Postcode S W 8 1 J Z

Country ENGLAND

DX

Telephone 02075829473



**Checklist**

We may return forms completed incorrectly or with information missing

Please make sure you have remembered the following

- ☐ The company name and number as registered in the 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
- ☐ You have provided a correct date of birth
- ☐ You have provided a business occupation if there is one
- ☐ 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 application if applying for this at the same time as completing this form
- ☐ You have entered the extent of the director's authority in Section 6
- ☐ You have completed Section 6, if applicable
- ☐ You have signed the form



**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 NR 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](http://www.companieshouse.gov.uk) or email [enquiries@companieshouse.gov.uk](mailto: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](http://www.companieshouse.gov.uk)