## AP01

## Appointment of director





County/Region

Postcode

Country

Go online to file this information www.gov.uk/companieshouse

PERTHSHIRE

0

υK

✓ 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 a corporate director. To do please use form APO2 'App of corporate director'.



SCT 06/11/2015

/2015 #48

company's registered office.

public record.

If you provide your residential address here it will appear on the

		COMPANIES HOUSE	
1	Company details		
Company number	5 C 3 2 8 7 8 9	→ Filling in this form Please complete in typescript or in bold black capitals.  All fields are mandatory unless specified or indicated by *	
Company name in full	METHVEN PHARMACY LIMITED		
2	Date of director's appointment		
Date of appointment	0 5 N N N V 2 V O V 1 V S		
3	① Former name(s)		
Title*	MR	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.	
Full forename(s)	GRAEME WALTER IRVING		
Surname	DAVIDSON		
Former name(s) •	rmer name(s) ●		
Country/State of residence	UK	residential address as stated in section 4a.  Month and year of birth Please provide month and year only. Provide full date of birth in section 3a.	
Nationality	BRITISH		
Month/year of birth <sup>❸</sup>	X X		
Business occupation (if any) •		Business occupation If you have a business occupation, please enter here. If you do not, please leave blank.	
4	New director's service address 9		
	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	21-24	on the public record. This does not have to be your usual residential address.	
Street	WELLMEADOW	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.	
Post town	BLAIRGOWRIE		

	APO1 Appointment of director	
5	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.	• Societas Europaea If the form is being filed on behalf
Signature	This form may be signed and authorised by: Director O, Secretary, Person authorised O, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity commission receiver and manager, CIC manager, Judicial factor.	of a Societas Europaea (SE) please delete 'director' and insert details of which organ of the SE the person signing has membership.  Person authorised Under either section 270 or 274 of the Companies Act 2006.
7	Additional former names (continued from Section 3)	
Former names •		Additional former names     Use this space to enter any     additional names.