

FORM NO. DIR-12

[Pursuant to sections 7(1) (c), 168 & 170 (2) of The Companies Act, 2013 and rule 17 of the Companies (Incorporation) Rules 2014 and 8, 15 & 18 of the Companies (Appointment and Qualification of Directors) Rules, 2014]



Particulars of appointment of directors and the key managerial personnel and the changes among them

Form Language

☒ English ☐ Hindi

Refer the instruction kit for filing the form.

1. *This form is for ☐ New company ☒ existing company

2. (a) * Corporate Identity Number (CIN) of company

U85300KA2021NPL148543

(b) Global location number (GLN) of company

Pre-fill

3. (a) Name of the company

ACTCAPITAL FOUNDATION FOR SOCIAL IMPACT

(b) Address of the
registered office
of the company

101, Yashila 1/1, 1st Main
Koramangala 8th Block
Bengaluru
Bangalore
Karnataka
560095

(c) E-mail ID of the company

loneyantony@gmail.com

4. Number of Managing director or director(s) for which the form is being filed

1

5. Details of the Managing Director, directors of the company

1 Details of the Managing Director or Director of the company

i Director Identification Number (DIN)

00207746

Pre-fill

ii Name

ANJALI BANSAL

iii Father's name

POORAN KRISHNA BANSAL

iv Present residential address

FLAT NO. 3202, A-WING VIVAREA TOWER, SANE GURUJI MARG
 JACOB CIRCLE, MAHALAXMI
 MUMBAI
 Maharashtra
 India
 400011

v Nationality

IN

vi Date of birth

25/02/1971

vii Gender

Female

viii ☐ Appointment ☒ Cessation ☐ Change in designation
 x Date of Appointment or
 change in designation

ix Designation

Director

(DD/MM/YYYY)

xi Category

xii Whether Chairman, Executive Director, Non-Executive Director

☐

Chairman

☐

Executive director

☐

Non Executive Director

xiii DIN of such director to whom appointee is alternate

Pre-fill

xiv Name of the director to whom such appointee is alternate

xv Name of the company or institution whose nominee the appointee is

xvi E-mail ID of director

anjalibansal21@gmail.com

xvii In case of cessation

Hereby confirmed that the above mentioned ☒ Director ☐ Managing director xviii is not associated with the company
 with effect from 23/05/2022 (DD/MM/YYYY) xix due to Resignation u/s 168

xx Interest in other entities

xxi Number of such entities

xxii *CIN/LLPIN/FCRN/Registration number

Pre-fill

xxiii * Name

xxiv * Address

xxv Nature of interest

xxvi * Designation

xxvii Percentage of Shareholding

xxviii Amount

xxix Others (specify)

6. Number of manager(s), secretary(s), Chief Financial Officer or Chief Executive Officer for which the form is being filed

7. Details of manager(s), secretary(s), Chief Financial Officer or Chief Executive Officer of the company

1	i Director Identification Number (DIN), if any	<input type="text"/>	<input type="button" value="Pre-fill"/>
	ii Income Tax permanent account number (PAN)	<input type="text"/>	<input type="button" value="Verify Details"/>
	iii <input type="radio"/> Appointment <input type="radio"/> Cessation		
	iv Membership number of the secretary	<input type="text"/>	
	v First Name	<input type="text"/>	
	vi Middle Name	<input type="text"/>	
	vii Last Name	<input type="text"/>	
	viii Father's name		
	ix First Name	<input type="text"/>	
	x Middle Name	<input type="text"/>	
	xi Last Name	<input type="text"/>	
	xii Present residential address	xiii Line I	<input type="text"/>
		xiv Line II	<input type="text"/>
	xv City	<input type="text"/>	
	xvi State	<input type="text"/>	xvii Pin Code <input type="text"/>
	xviii ISO Country Code	<input type="text"/>	
	xix Country	<input type="text"/>	
	xx Phone	<input type="text"/>	xxi Fax <input type="text"/>
	xxii Date of birth	<input type="text"/>	(DD/MM/YYYY)
	xxiii Designation	<input type="text"/>	
	xxiv Date of Appointment or cessation	<input type="text"/>	(DD/MM/YYYY)
	xxv E-mail ID	<input type="text"/>	

Attachments

List of attachments

- (1) Declaration by first director
- (2) Declaration of the appointee director
in Form No. DIR-2;
- (3) Notice of resignation;
- (4) Evidence of cessation;

Attach

Attach

Attach

Attach

(6) Optional attachment(s) - if any.

Attach

ACT Resignation.pdf
ACT CTC for anjali bansal .pdf

Remove attachment

Declaration

I * Loney Antony

☐ A person named in the articles as a of the company

(in case if a new company) or

☒ authorized by the Board of Directors of the Company vide 11
number dated 27/05/2022

to sign this form and declare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of this form and matters incidental thereto have been complied with. I also declare that all the information given herein above is true, correct and complete including the attachments to this form and nothing material has been suppressed.

* To be digitally signed by

Loney
Antony
Digitally signed by
Loney Antony
Date: 2022.06.27
15:37:45 +05'30'

* Designation Director

* Director identification number of the director; or DIN or PAN of the
manager or CEO or CFO; or Membership number of the secretary 00003297

Certificate by practicing professional

I declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 and Rules thereunder for the subject matter of this form and matters incidental thereto and I have verified the above particulars (including attachment(s)) from the original/certified records maintained by the Company/applicant which is subject matter of this form and found them to be true, correct and complete and no information material to this form has been suppressed. I further certify that:

- ☒ The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order ;
- ☒ All the required attachments have been completely and legibly attached to this form;
- ☒ It is understood that I shall be liable for action under Section 448 of The Companies Act, 2013 for wrong certification, if any found at any stage.

* To be digitally signed by

Masood
Ahmed Khan
Digitally signed by
Masood Ahmed Khan
Date: 2022.07.06
13:25:40 +05'30'

- ☒ Chartered accountant (in whole-time practice) or ☐ Cost accountant (in whole-time practice) or
☐ Company secretary (in whole-time practice)

* Whether Associate or fellow ☐ Associate ☒ Fellow

Membership number 203455

Certificate of Practice Number

Modify

Check Form

Prescrutiny

Submit

This eForm has been taken on file maintained by the Registrar of companies through electronic mode and on the basis of statement of correctness given by the filing company.



