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Please complete in typescript,
or in bold black capitals.

CHWP000

LLP363

Annual Return of a Limited Liability Partnership

LLP Number

OC304834

Full Name of Limited
Liability Partnership

MT Thaler INVESTMENT
MANAGEMENT LLP

Date of this return

The information in this return
is made up to

Day Month Year
09 06 2008

Date of next return

If you wish to make your next
return on a date earlier than
the anniversary of this return
please show the date here

Day Month Year
[][][][][][]

Registered Office

Any change of
registered office
must be notified on
Form LLP287

Show here the address
as at the date of
this return.

8 FREDERICK'S PLACE

Post town

LONDON

County

[][][][][][]

UK
Postcode

EC2R8HY

Register of
Debenture Holders

If there is a register of
debenture holders, or a
duplicate of any such
register or part of it,
which is not kept at the
registered office, state
here where it is kept

Post town

[][][][][][]

County

[][][][][][]

UK
Postcode

[][][][][][]

List members on page 2

Certificate

As a designated member I certify that the information given in this return is
true to the best of my knowledge and belief

Signed

Designated Member

Date

09/06/2008

When you have signed the return send it
with the fee to the Registrar of Companies
Cheques should be made payable to

This return includes

1

continuation sheets

(enter number)



A06 12/06/2008 131
COMPANIES HOUSE

When you have completed and signed the form please send it to the
Registrar of Companies at

Companies House, Crown Way, Cardiff, CF14 3UZ

DX 33050 Cardiff

for partnerships registered in England and Wales

or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

DX 235 Edinburgh
or LP - 4 Edinburgh 2

for partnerships registered in Scotland

THURSDAY

Members

Please list members in alphabetical order

In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name

**** Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address**

☐

Details of new members must be notified on form LLP288a

Surname or Corporate Name	DAVID ASERKOFF		
Forename(s)	DAVID ADAM		
Address **	FLAT 2		
	The Pryors, EAST HEAT ROAD		
Post town	LONDON		
County / Region		UK Postcode	NW3 1BS
Country		Tick box if designated member <input type="checkbox"/>	

Member Reference Number *(as advised by Companies House)

Date of Birth

Day	Month	Year
3	0	7
1	9	7
0		0

* Voluntary information

Members

Please list members in alphabetical order

In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name

**** Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address.**

☐

Details of new members must be notified on form LLP288a

Surname or Corporate Name	MT THALER SERVICES COMPANY		
Forename(s)			
Address **	8 FREDERICK'S PLACE		
Post town	LONDON		
County / Region		UK Postcode	EC2R 8HY
Country		Tick box if designated member <input checked="" type="checkbox"/>	

Member Reference Number *(as advised by Companies House)

Date of Birth

Day	Month	Year

* Voluntary information

Please complete in typescript,
or in bold black capitals

CHWP000

LLP363 cont

Annual Return (continuation sheet)

LLP Number **OC04834**

Members (Please list members in alphabetical order)

In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address In the case of a corporation or Scottish firm, give the registered or principal office address

☐

Details of new members must be notified on form LLP2 88a

Surname or Corporate Name **SONENSHINE**
Forename(s) **MICHAEL ADAM**
Address †† **16 LAWN ROAD**
GARDEN FLAT 1
Post town **LONDON**
County / Region **UK** Postcode **NW3 2XR**
Country **Tick box if designated member** ☒

Member Reference Number *(as advised by Companies House)

Day Month Year
Date of Birth **26 08 1964**

* Voluntary information

Members (Please list members in alphabetical order)

In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name

†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address In the case of a corporation or Scottish firm, give the registered or principal office address

☐

Details of new members must be notified on form LLP2 88a

Surname or Corporate Name
Forename(s)
Address ††
Post town
County / Region **UK** Postcode
Country **Tick box if designated member** ☐

Member Reference Number *(as advised by Companies House)

Day Month Year
Date of Birth

* Voluntary information