

Please complete in typescript,

300022/30 LLP363

**Annual Return of a Limited** 

or in bold black cap	pitals.	Liability Partnership
CHWP000	LLP Number	
	Il Name of Limited ability Partnership	
	Date of this return e information in this return is made up to	0 ,5 0 ,4 2 ,0 ,0 ,9
If you return the ar	Date of next return wish to make your next n on a date earlier than nniversary of this return se show the date here.	Day Month Year
	Registered Office Show here the address as at the date of this return.	14 Church Street  Whitchurch
	Post town	Basingstoke
	County	Hampshire UK Postcode RG28 7AB
D	Register of bebenture Holders	
If there is a register debenture holders, or duplicate of any sucregister or part of which is not kept at the gistered office, states where where it is kept	a Post town it, he County	
	List members o	on page 2
	Certificate Signed	As a designated member I certify that the information given in this return is true to the best of my knowledge and belief.  Date  Designated Member
Mheu you have sig	ned the return send it i.	(enter number)  When you have completed and signed the form please send it to the
A46 2		Registrar of Companies at:  Companies House, Crown Way, Cardiff, CF14 3UZ  DX 33050 Card  for partnerships registered in England and Wales  Or  Companies House 27 Coatte Toward Ediphyrah EH1 2EB

for partnerships registered in Scotland

or LP - 4 Edinburgh 2

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.		Details of new members must be notified on form LLP288a
	Surname or Corporate Name	Pressland
	Forename(s)	Paul Ian Hamilton
Tick this box if the address shown is a service address for the beneficiary of a Confidentiality	Address **	Fulham Park House, 1a Chesilton Road
Order granted under section 723B of the Companies Act	Post town	London
1985 otherwise, give your usual residen- tial address. In the	County / Region	Postcode SW6 5AA
case of a corpora- tion or Scottish	Country	UK Tick box if designated member
firm, give the regis- tered or principal office address.		
* Voluntary information	Member Reference Number * (as advised by Companies House)	Day Month Year  Day Month Year  Day Month Year
Members Please list members	in alphabetical order	
In the case of a member that is a corporation or a		Details of new members must be notified on form LLP288a
Scottish firm, the name is the	Surname or Corporate Name	Henwood
corporate or firm name.	Forename(s)	Tim
** Tick this box if	Address <sup>++</sup>	90 Mostyn Road
the address shown is a service address for the beneficiary		Wimbledon
of a Confidentiality Order granted under section 723B of the	Post town	London
Companies Act 1985 otherwise, give your usual residential	County / Region	Postcode SW19 3LP
address. In the case of a corporation or Scottish firm, give the registered or principal office address.	Country	UK Tick box if designated member
	Member Reference	Day Month Year
	Number *(as advised by Companies House)	Date of Birth 1 7 0 2 1 9 6 3

\* Voluntary information