



Please complete in typescript, or in bold black capitals.

LLP363

Annual Return of a Limited Liability Partnership

CHWP000						
	LLP Number	OC320262				
	Full Name of Limited	DH VACUUM SERVICES LLP				
	Liability Partnership					
	Date of this return	Day Month Year				
	The information in this return is made up to	0 9 0 6 2 0 0 8				
	Date of next return	Day Month Year				
	rou wish to make your next eturn on a date earlier than					
	e anniversary of this return please show the date here.					
Any change of	Registered Office Show here the address	522 WALMERSLEY ROAD				
registered office must be notified of Form LLP287.	as at the date of					
FOIIII EEF207.	Post town	BURY				
	County	LANCASHIRE UK Postcode BL9 6QT				
	Register of					
	Debenture Holders					
If there is a regis						
duplicate of any register or part	such Post town					
which is not kept registered office,	at the County	UK				
here where it is kep		Postcode				
		As a designated member I certify that the information given in this return is				
3	Certificate	true to the best of my knowledge and belief.				
* '	Signed	Date 13.01.09				
		Designated Member				
When you have	signed the return send i					
with the fee to th	e Registrar of Companies Id be made payable to	This return includes Continuation sneets.				
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		When you have completed and signed the form please send it to the Registrar of Companies at:				
FRIDA		Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardifor partnerships registered in England and Wales or				
A30	*AJTHN6KG* 16/01/2009	Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburg for partnerships registered in Scotland or LP - 4 Edinburgh				
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Scottish firm, the name is the	Sumame or Corporate Name	I HILLON										
corporate or firm name.	Forename(s)	CATHERINE RUTH										
** Tick this box if the address shown	Address #	522 WALMERSLEY ROAD										
is a service address for the beneficiary of a Confidentiality												
Order granted under section 723B of the Companies Act	Post town	BURY										
1985 otherwise, give your usual residen-	County / Region	LANCASHIRE	Postco	UK ode BL9 6QT								
tial address. In the case of a corpora- tion or Scottish firm, give the regis-	Country	ENGLAND Tick box if desi						signated member				
tered or principal office address.												
	Member Reference		1		Da	ıy I	Month	, ,	Year	•		
	Number *(as advised by Companies House)	78138	Date	of Birth	1	7	0 5	1 9	15	6		
* Voluntary information												
Members Please list membe	rs in alphabetical order											
In the case of a member that is a	·	Details of new members must be notified on form LLP288a										
corporation or a Scottish firm, the name is the	Surname or Corporate Name	HILTON										
corporate or firm name.	Forename(s)	DENNIS ROY										
** Tick this box if	Address **	522 WALMERSLEY ROAD										
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	Post town	BURY										
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give the registered or principal office address.												
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