

BLUEPRINT

2000

714437/120
LLP363**Annual Return of a Limited Liability Partnership**

Please complete in typescript,
or in bold black capitals.

CHFP010

LLP Number

OC320286

Full Name of Limited Liability Partnership

DELPH 2 LLP

Date of this return
The information in this return is made up to

Day		Month		Year			
1	2	0	6	2	0	0	8

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

Show here the address as at the date of this return

35 BALLARDS LANE

Any change of registered office must be notified on form LLP287

Post town

LONDON

County

UK
Postcode N3 1XW

Register of Debenture Holders

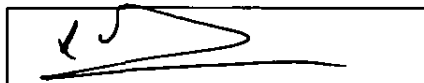
If there is a register of debenture holders, or a duplicate of any such register or part of it, which is not kept at the registered office, state here where it is kept

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**Date**

25/6/09

When you have signed the return send it to

Designated Member

This return includes

2

continuation sheets

(enter number)

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
for partnerships registered in Scotland DX 235 Edinburgh or LP - 4
Edinburgh 2

SATURDAY



A7YFO1J2

A17 19/07/2008 122

COMPANIES HOUSE

LKVDP14/

LD5 04/07/2008 261

COMPANIES HOUSE

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

Surname or
Corporate Name

CROCKER

Forename(s)

PAUL

Address ††

11 STANHOPE GATE

Post town

LONDON

County / Region

Country

UK

Postcode

W1K 1AN

Tick box if designated member

X

†† 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

Member Reference Number *(as
advised by Companies House)

Date of Birth

Day	Month	Year
2	5	0
1	1	1
9	6	1

* 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

Surname or
Corporate Name

CROCKER

Forename(s)

VANESSA SARA

Address ††

11 STANHOPE GATE

Post town

LONDON

County / Region

Country

UK

Postcode

W1K 1AN

Tick box if designated member

X

†† 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

Member Reference Number *(as
advised by Companies House)

Date of Birth

Day	Month	Year
3	0	0
6	1	9
6	3	

* Voluntary
Information

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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

Surname or
Corporate Name

Details of new members must be notified on form LLP288a

DELPH INVESTMENTS LIMITED

Forename(s)

Address ††

~~10 BARNARD'S LANE~~ 11 STANHOPE GATE

†† 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

☐

Post town

LONDON

County / Region

UK Postcode ~~W1A 1AW~~ W1A 1AW

Country

Tick box if designated member

☐

Member Reference Number *(as
advised by Companies House)

Date of Birth Day Month Year

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* Voluntary
Information

Members

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Surname or
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Forename(s)

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Post town

County / Region

Country

UK Postcode

Tick box if designated member

☐

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Date of Birth Day Month Year

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Information

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