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LLP363

Annual Return of a Limited Lishility Dartnershin

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CHWP000	LLP Number	ber OC321283							
Full Name of Limited Liability Partnership		CARLIN	IG & KEN	TLLP					
τ	Date of this return The information in this return is made up to	Day	Month 0 7 2	Year	7				
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					
Any change of registered office must be notified on Form LLP287	Registered Office Show here the address as at the date of this return. Post town	11-12 0	ueen Sq	uare					
		ļ							
		Bristol							
	County					UK Postcode BS1 4NT			
	Register of Debenture Holders	ſ		_					

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

County List members on page 2

Post town

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

UK

Postcode

01/07/07

Designated Member

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

A01 21/07/2007 **COMPANIES HOUSE** This return includes

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

DX 235 Edinburgh or LP - 4 Edinburgh 2

for partnerships registered in Scotland

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Please list members	in alphabetical order										
In the case of a member that is a corporation or a		Details of new members mu	ust be	notified o	on form LLP2	!88a 					
Scottish firm, the name is the	Surname or Corporate Name	CARLING				==					
corporate or firm name.	Forename(s)	s) IAN									
†† Tick this box if the address shown	Address **	FOSSE COTTAGES									
Is a service address for the beneficiary		BROKENBOROUGH									
of a Confidentiality Order granted under section 723B of the	Post town	MALMESBURY									
Companies Act 1985 otherwise, give your usual residen-	County / Region	WILTSHIRE		Postcode SN16 0QZ							
tial address. In the case of a corpora- tion or Scottish	Country	ENGLAND		Tick box if designated member							
firm, give the regis- tered or principal office address.											
	Member Reference			Da		Yea					
	Number * (as advised by Companies House)	11324	Date o	f Birth 0	9 0 2 1	T ₉ T	4 7				
* Voluntary Information											
_	ın alphabetical order										
In the case of a member that is a		Details of new members m	ust be	notified o	on form LLP	288a					
corporation or a Scottish firm, the name is the	Surname or Corporate Name	KENT									
corporate or firm name	Forename(s)	JULIE ELIZABETH				<u></u>					
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	Address #	HOWARDS END									
		SHELDON MANOR									
	Post town	CHIPPENHAM									
	County / Region	WILTSHIRE		Postcode SN14 ORG							
usual residential address in the case of a corpora-	Country	ENGLAND	ick box if de	x if designated member							
tion or Scottish firm, give the registered or principal office address.											
				D	ay Month	Ye	ar				
	Member Reference Number *(as advised	81299	Date o	of Birth 1	7 0 3 1	,9 ,	5 ,9				
	by Companies House)			L_	L_L	لــــــــــــــــــــــــــــــــــــــ	1				

Members

* Voluntary information