100092/2580

## LLP363

Please complete form in typescript, or in bold black capitals. CHFP135

## Annual Return of a Limited Liability Partnership

DX 235 Edinburgh or LP – 4 Edinburgh 2

	LLP Number	06322132
Full Name of Limited		
		NOMINA (No192) LLP
Liability Partnership		
Date of this return This information in this return is made up to		Day Month Year
		2009 2009
	Date of next return	Day Month Year
i	you wish to make your next return on a date earlier than ne anniversary of this return please show the date here.	
Any change of registered office must be notified on Form LLP287	Registered Office Show here the address as at the date of this return	85 Gracechurch Street
7 Olivi EEV EGV		
	Post town	LONDON
	County	Postcode EC3V OAA
If there is a register debenture holders, o duplicate of any su	ra	
register or part of which is not kept at t registered office, sta here where it is kept	it, the Post town	
nere more a remope	County	UK Postcode
	List members on page	e 2
true to the best of		As a designated member I certify that the information given in this return is true to the best of my knowledge and belief
		MONTHA DESIGNATED MEMBER No 1 TO ate 2 2 OCT 2009
When you have signed the return send it with the fee to the Registrar of		This return includes continuation sheets.
Companies. Cheques should be made payable to <b>Companies House</b> .		(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, 139 Fountainbridge, Edinburgh, EH3 9FF

For partnerships registered in Scotland

PC1

24/10/2009 COMPANIES HOUSE

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	Nomina Designated Member No. 1 Limited
corporate or firm name.	Forename(s)	
Tick this box if	Address **	85 Gracechurch Street
is a service address for the beneficiary of a Confidentiality		
Order granted under section 723B of the Companies Act	Post town	LONDON
1985 otherwise, give your usual residen-	County / Region	Postcode EC3V 0AA
tial address. In the case of a corpora- tion or Scottish	Country	Tick box if designated member
firm, give the regis- tered or principal office address.		
		Doy Month Voc
	Member Reference Number *(as advised	Day Month Year  Date of Birth
* Voluntary	by Companies House)	
information		
Members Please list members	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	Nomina Designated Member No.2 LLP
corporate or firm name.	Forename(s)	
<sup>††</sup> Tick this box if	Address #	85 Gracechurch Street
the address shown is a service address for the beneficiary		
of a Confidentiality Order granted under section 723B of the	Post town	LONDON
Companies Act 1985 otherwise, give your usual residential	County / Region	Postcode EC3V 0AA
address. In the case of a corporation or Scottish firm, give the registered or principal office address.	Country	Tick box if designated member
	Marsha : D. C	Day Month Year
	Member Reference Number *(as advised	Date of Birth
	by Companies House)	

Members

\* Voluntary information

	Please list membe	rs 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 corporate or firm name.	Surname or Corporate Name	MITCHET
		Forename(s)	ANSHONT DWEN RIGHT
	<sup>††</sup> Tick this box if the address shown	Address **	13 THOUR CRESUNT
	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		later
		Post town	LEISURE ISLAND
		County / Region	KNYSMA 6571 UK Postcode
		Country	SOUTU AFRICA Tick box if designated member
	firm, give the regis- tered or principal office address.		
			Day Month Year
		Member Reference Number *(as advised	Date of Birth 2,8 0,2 1,9 2-7
		by Companies House)	27 02 1/2/
	* Voluntary		
	information		
	Members		
	Please list member	rs 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 corporate or firm name.	Surname or Corporate Name	MITCHLEY
		Forename(s)	NICHOLDS RICHARD WON
t :: : : : : : : : : : : : : : : : : :	Tick this box if	Address **	HOUSE MIMBER 11 SIMPANS 354
	the address shown is a service address for the beneficiary		JALAN MUARA,
	of a Confidentiality Order granted under section 723B of the	Post town	SUNSAI TI LONG
	Companies Act 1985 otherwise, give your usual residential	County / Region	BONDOR SERI BERAVEN Postcode
	address. In the case of a corpora-	Country	Brune / Tick box if designated member
	tion or Scottish firm, give the registered or principal office address.		
			Day Month Year
		Member Reference	
		Number *(as advised   by Companies House)	Date of Birth 0 3 3 4 / 9 5 7

Members

\* Voluntary information