

000010/30

LLP363

Annual Return of a Limited Liability Partnership



Please complete in typescript, or in bold black capitals.

CHWP000

LLP Number **OC 33 1172**

Full Name of Limited Liability Partnership **ACADEMY VENTURES LIMITED**

Date of this return
The information in this return is made up to
Day Month Year
07 09 2008

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

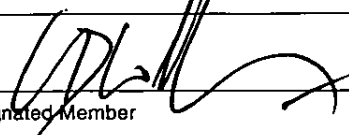
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Registered Office
Show here the address as at the date of this return.
Any change of registered office must be notified on Form LLP287.
Post town **CE DAR COURT**
BARTON ROAD
BURY ST EDMUNDS
County **SUFFOLK** UK Postcode **IP32 7BE**

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 **22/1/09**
Designated Member

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

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 or
Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh
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.

†† 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.

☐

Details of new members must be notified on form LLP288a

Surname or Corporate Name

WALLING

Forename(s)

CHRISTOPHER DAVID

Address ††

CEDAR COURT

BARTON ROAD

Post town

BURY ST EDMUNDS

County / Region

SUFFOLK

UK

Postcode

IP32 7BE

Country

UK

Tick box if designated member

☒

✓

Member Reference Number *(as advised by Companies House)

Date of Birth

Day Month Year

15 03 1962

* 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.

†† 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.

☐

Details of new members must be notified on form LLP288a

Surname or Corporate Name

WALLING

Forename(s)

ANGELA LILY

Address ††

CEDAR COURT

BARTON ROAD

Post town

BURY ST EDMUNDS

County / Region

SUFFOLK

UK

Postcode

IP32 7BE

Country

Tick box if designated member

☒

✓

Member Reference Number *(as advised by Companies House)

Date of Birth

Day Month Year

11 12 1967

* Voluntary information