

LLP363

Please complete in typescript,

Annual Return of a Limited **Liability Partnership**

or in bold black capitals.

CHFP010

LLP Number

OC339798

Full Name of Limited Liability Partnership

Montagu	Private	Equity	Associates	LLP	
-		_			

Date of this return

The information in this return is made up to

Day_	Month	Year		
0 1	0 9	2 0 0 9		

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		
1 7	0 6	2 0 1 0		

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

County

<u> </u>	
London	
	UK SE1 2AP

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

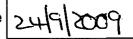
As a designated member I certify that the information given in this return is true to the best of my knowledge and belief.

Signed

When you have signed the return send it

Designated Member

Date



with the fee to the Registrar of Companies. Cheques should be made payable to

aniae Hauep



25/09/2009 **COMPANIES HOUSE**

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 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

DX 33050 Cardiff

Please list members in alphab	etical order				
In the case of a member that i		Details of new members must be r	notified on form LLP288a		
a corporation or a Scottish firm the name is the corporate or firm name.	n, Surname or Corporate Name	Keough			
	Forename(s)	Mark			
†† Tick this box if the address shown is a service address for	Address ††	3 Elizabeth Close			
the beneficiary of a Confidentiality Order granted under section	Post town	London			
723B of the Companies Act 1985 otherwise, give your	County / Region	UK WO 1PN			
usual residential address. In the case of a corporation or	Country	United Kingdom	Postcode W TEN Tick box if designated member X		
Scottish firm, give the registered or principal office address.			<u></u>		
Member Reference Number *₁			Day Month Year Date of 0 2 1 0 1 9 5 4		
* Voluntary Information	l by Companies House)		Birth		
Members Please list members in alphab In the case of a member that i		Details of new members must be r	notified on form LLP288a		
a corporation or a Scottish firm the name is the corporate or firm name.	Surname or Corporate Name	Montagu Private Equity LLP			
ann name.	Forename(s)				
†† Tick this box if the address shown is a	Address ††	2 More London Riverside			
service address for the beneficiary of a Confidentiality Order					
granted under section 723B of the Companies Act 1985	Post town	London			
otherwise, give your usual residential address. In the case	County / Region		Postcode SE1 2AP		
of a corporation or Scottish firm, give the registered or principal office address.	Country	United Kingdom	Tick box if designated member x		
	Reference Number *(as f by Companies House)		Day Month Year Date of Birth		
* Voluntary Information	,		911 01 <u> </u>		

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Members Please list members in alpha	abetical order.	Dataila of your mambara mu	at he notified on form LLD288s	
In the case of a member that a corporation or a Scottish fithe name is the corporate or	m, Surname or	I MUM ASSOCIATECO Limited		
firm name.	Forename(s)			
†† Tick this box if the address shown is a	Address ††	2 More London Riverside		
service address for the beneficiary of a Confidentiality Order				
granted under section 723B of the Companies Act 1985	Post town	LIK		
otherwise, give your usual residential	County / Region			
address. In the case of a corporation or Scottish firm, give the registered or principal	Country	United Kingdom	Tick box if designated member	
office address.			Day Month Year	
Member Reference Number *(as advised by Companies House) * Voluntary Information			Date of Birth	
Members Please list members in alpha In the case of a member tha		Details of new members mu	st be notified on form LLP288a	
a corporation or a Scottish fi the name is the corporate or firm name.	Out Hallic Of			
	Forename(s)			
†† Tick this box if the address shown is a service address for	Address ††			
the beneficiary of a Confidentiality Order granted under section				
723B of the Companies Act 1985	Post town		UK	
otherwise, give your usual residential address. In the case	County / Region		Postcode	
of a corporation or Scottish firm, give the registered or principal office address.	Country		Tick box if designated member	
Member Reference Number *(as			Date of Day Month Year	
* Voluntary Information	ed by Companies House)	L <u>.</u>	Birth	

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