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Pleas	se con	nplete	in	typescript,	or	in
bold	black	capita	ıls.	<b>.</b>		

## **Annual Return**

Joid Black Capitals.				
CHFP000	any number	1189488		
•	name in full	GRAYROY LIMITED		
Date of this return The information in this return is	s made up to	Day Month Year 2 3 / 0 9 / 2 0 0	9	
Date of next return  If you wish to make your next is earlier than the anniversary of please show that date here. Conclude the send a form at appropriate time.	this retum ompanies	Day Month Year	_ L	
Registered Office		BRONALLT		
Show here the address at the date of this return				
Any change of registered office	Post town	DINORWIG		
must be notified	unty/Region	GWYNEDD		
ι	JK Postcode	L L 5 5 3 E	<u> R  </u>	
Principal business act	number(s) for	6523	L <sup>7414</sup>	
the principal activity or activities  If the code number cannot be give a brief description of principal controls.	determined,			





PC5 02/10/2009 **COMPANIES HOUSE** 

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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 companies registered in England or Wales or Companies House, 139 Fountainbridge, Edinburgh, EH3 9FF DX ED235 Edinburgh 1 For companies registered in Scotland

DX 33050 Cardiff

or LP-4 Edinburgh 2

Register of members					
registered office, state here					
	Post town	<u></u>			
	County/Region				
	UK Postcode				
Register of Debentur If there is a register of debe- duplicate of any such registe is not kept at the registered where it is kept	nture holders, or a er or part of it, which				
where it is kept	Post town				
	County/Region				
	UK Postcode				
Company type					
Public limited company	y				
Private company limite	ed by shares				
Private company limite share capital	ed by guarantee with	out			
Private company limite section 30 Private company limite under section 30					
Private unlimited comp	oany with share capi	tal			
Private unlimited comp	pany without share c	apital			
Company Secretary		Details of a new company secretary must be notified on form 288a			
* Voluntary details (Please photocopy N	ame *Style/Title	e   MR			
this area to provide details of joint secretaries).	Forename(s	)   ANDRE			
†† Tick the box if the	Surname	140//40			
address shown is a service address for the beneficiary of a	Address †	THE OLD BLOOK OFF SO			
Confidentiality Order granted under section		WESEL			
723B of the Companies Act 1985. Otherwise, give your usual	Post towr	I NRW			
residential address. In the case of a corporation		wn			
or Scottish firm, give the registered or principal office address.	County/Region				
If a partnership, give the	UK Postcode				
names and addresses of the partners or the name of the partnership and office address	Country	GERMANY 46485			
1					

Directors Please list the directors * Voluntary details In the case of a director that is a corporation or a	in alphabetical order  Name *Style/Title		Details of new directors must be notified on form 288a  MR		
Scottish firm, the name is the corporate or firm			Day Month Year		
name		Date of birth	2 5 1 0 5 1 1 9 4 7		
	Forename(s)	MALCOLM			
†† Tick the box if the address shown is a service address for th		Surname	GRIFFITH		
	Address ††	BRONALLT			
beneficiary of a Confidentiality Order			<u> </u>		
granted under section 723B of the Companie Act 1985. Otherwise,		_ Post town	DINORWIG		
give your usual residential address. In	٠ .		GWYNEDD		
the case of a corporation or Scottis	h	County/Region			
firm, give the registers or principal office address.	,u	UK Postcode			
		Country			
		Nationality	BRITISH		
	Busine	ss occupation	L		
Directors Please list the directors * Voluntary details	in alphabe	etical order	Details of new directors must be notified on form 288a		
In the case of a director that is a	Name *Style/Title				
corporation or a Scottish firm, the			Day Month Year		
name is the corporate or firm name		Date of birth			
nam.		Forename(s)			
		Surname			
†† Tick the box if the address shown is a service address for the	18				
beneficiary of a Confidentiality Order			1		
granted under section 723B of the Companie					
Act 1985. Otherwise, give your usual residential address. In	1				
the case of a corporation or Scottls	sh				
firm, give the registe or principal office address.	ed	UK Postcode			
audiess.		Country			
	Nationality				
	Busine	ess occupation			

Issue share capital Enter details of all the shares in issue at the date of this return	Class (e.g. Ordinary/Preference)	Number of shares Issued	Aggregate Nominal Value (i.e. Number of shares issued multipiled by nominal value per share, or total amount of stock)	
	ORDINARY	50,020	50,020	
	L	L		
	Totals	50,020	50,020	
Traded public companies A traded public company means a company any of whose shares are shares admitted to trading on a regulated market	Please tick this box if your public company at any time this return	company was a traded e during the period of		
List of past and present shareholders (use attached schedule where appropriate)	Please tick the appropriate	box below:	On paper in another format	
Private or non-traded public companies are required to provide a "full list" if one was not included with either of the last two returns.	A full list of shareholders for a private or non-traded public company is enclosed. Please complete Schedule A.			
Traded public companies are required to provide a list of shareholders who held at least 5% of the Issued shares of any share class if a list was not provided with either of the last two	A list of shareholders holding at least 5% of the issued shares of any share class for a traded public company is enclosed. Please complete Schedule B.			
returns.	A list containing sharehold  → For private or non-tr  complete Schedule	aded public companies, pl	ease	
	→ For traded public companies, please complete Schedule B			
	There were no shareholde	r changes in this period		
Certificate	I certify that the information given in this return is true to the best of my knowledge and belief			
Signed		HITH	Date 24/09/09	
*Please delete as appropriate  When you have signed the return, send it with the fee to the Registrar of Companies. Make cheques payable to Companies House.	*(director / secretary) This return includes	continuation sheet (enter number)	S	
You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you				
give will be visible to searchers of the public record.	DX number	DX exchange	Page 4	

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	ORDINARY	50,020	50,020	
	<u> </u>			
	Totals	50,020	50,020	
Traded public companies A traded public company means a company any of whose shares are shares admitted to trading on a regulated market	Please tick this box if your public company at any tim this return			
List of past and present shareholders (use attached schedule where appropriate)	Please tick the appropriate	box below:	On paper In another format	
Private or non-traded public companies are required to provide a "full list" if one was not included with either of the last two returns.	A full list of shareholders for a private or non-traded public company is enclosed. Please complete Schedule A.			
Traded public companies are required to provide a list of shareholders who held at least 5% of the issued shares of any share class if a list was not provided with either of the last two	A list of shareholders holding at least 5% of the issued shares of any share class for a traded public company is enclosed. Please complete Schedule B.  A list containing shareholder changes is enclosed			
returns.				
	→ For private or non-traded public companies, please complete Schedule A			
	→ For traded public co Schedule B	ompanies, <b>please complet</b>	9	
	There were no shareholde	er changes in this period		
Certificate	I certify that the information knowledge and belief	n given in this return is true	to the best of my	
Signed			Date	
* Please delete as appropriate  When you have signed the return, send	*(director / secretary)			
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			Page 4	

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