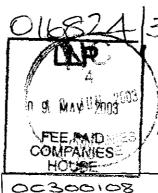




Please complete in typescript, or in bold black capitals.

CHFP000

**LLP Number** 



LLP363

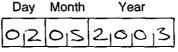
**Annual Return of a Limited Liability Partnership** 

	(
uil Name of Limited	2 as GNBU

LLP 111 SOUCHORS Liability Partnership

Date of this return

The information in this return is made up to



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	Month Year		r

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

County

ST. ANDREW 9-13 SOCIO UK

Postcode

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** 

1512003

Designated Member

When you have signed the return send it with the fee of £35 to the Begistrar of

Con pay



**COMPANIES HOUSE** 

0049 10/06/03

AUG COMPANIES HOUSE Form April 2002

09/05/08

This return includes



continuation sheets.

(enter number)

/hen you have completed and signed the form please send it to the egistrar of Companies at:

ompanies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff or partnerships registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for partnerships registered in Scotland DX ED235 Edinburgh

## Members Please list members in alphabetical order In the case of a Details of new members must be notified on form LLP288a member that is a corporation or a Surname or Scottish firm, the Corporate Name name is the corporate or firm JACQUELIZIE Forename(s) name. <sup>#</sup> Tick this box if Address \*\* 125 SISRAELI the address shown is a service address Putaen for the beneficiary of a Confidentiality Order granted under クロロマ Post town section 723B of the Companies Act UK 1985 otherwise, give County / Region 222 らいい your usual residen-Postcode tial address. In the Tick box if designated member Country case of a corpora-NITED KIJGDON tion or Scottish firm, give the registered or principal office address. Day Month Year Member Reference 975 Number \*(as advised Date of Birth by Companies House) \* Voluntary information Members Please list members in alphabetical order In the case of a Details of new members must be notified on form LLP288a member that is a corporation or a Scottish firm, the Surname or NOMIN IMITES COMBINED Corporate Name name is the corporate or firm Forename(s) name. Address # VICTORIA SUSE # Tick this box if the address shown is a service address STREET for the beneficiary of a Confidentiality Order granted under Post town section 723B of the UK Companies Act 1985 County / Region ECZA HNG otherwise, give your Postcode usual residential Tick box if designated member address. In the Country KING BON しろうかり case of a corporation or Scottish firm,

Day Month Year Member Reference Number \*(as advised 518 Date of Birth by Companies House) \* Voluntary RESIGNED: 02/05/01 information

give the registered or principal office address.

 Please complete in typescript, or in bold black capitals.

## LLP363 cont

. CHFP000

04/02

## **Annual Return (continuation sheet)**

	_				
	LLP Number	00300108			
Members (Please list members in alphabetical order)					
In the case of a		Details of new members must be notified on form LL 288a			
member that is a corporation or a Scottish firm, the name is the corporate or firm name.	Surname or Corporate Name	COMBINED SECRETARIAL SERVICES LIMITED			
	Forename(s)				
** Tick this box if the	Address **	VICTORIA HOUSE			
address shown is a service address for		BY PAUL STREET			
the beneficiary of a Confidentiality Order granted under section	Post town	LONDON			
723B of the Companies Act 1985 otherwise, give your	County / Region	Postcode ECZA UNG			
usual residential address. In the case of a corporation or	Country	UNited Kingのon Tick box if designated member			
Scottish firm, give the registered or principal office address.					
* Voluntary information	Member Reference Number * (as advised by Companies House)	RESIGNED: 02/05/01			
In the case of a	list members in alphal				
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				
corporate or firm name.	Forename(s)	IAN ISAAC			
<sup>††</sup> Tick this box if the address shown is a	Address **	17 JOHN STREET			
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.	Post town				
	County / Region	Postcode			
	Country	UNITED KINCDOM Tick box if designated member			
	Member Reference	1 0 7/			
* Voluntary information	Number *(as advised by Companies House				

## Members Please list members in alphabetical order In the case of a Details of new members must be notified on form LLP288a member that is a corporation or a Surname or Scottish firm, the name is the Corporate Name corporate or firm Forename(s) name. <sup>††</sup> Tick this box if the Address \*\* address shown is a service address for the beneficiary of a **Confidentiality Order** granted under section Post town 723B of the Companies Act 1985 UK otherwise, give your County / Region usual residential Postcode address. In the case Tick box if designated member of a corporation or Country Scottish firm, give the registered or principal office address. Day Month Year Member Reference Number \*(as advised Date of Birth by Companies House) \* Voluntary information Members Please list members in alphabetical order In the case of a Details of new members must be notified on form LLP288a member that is a corporation or a Surname or Scottish firm, the Corporate Name name is the corporate or firm Forename(s) name. <sup>++</sup> Tick this box if the Address \*\* address shown is a service address for the beneficiary of a **Confidentiality Order** granted under section

723B of the Post town Companies Act 1985 otherwise, give your UK County / Region usual residential Postcode address. In the case of a corporation or Tick box if designated member Country Scottish firm, give the registered or principal office address. Day Month Year Member Reference Number \*(as advised Date of Birth

\* Voluntary information

by Companies House)