

Please complete in typescript, or in bold black capitals.



LLP363

Annual Return of a Limited Liability Partnership

CHWP000	- r	Liability Partnership
	LLP Number	06 300 174
	ıli Name of Limited iability Partnership	MANTES LLP
TI	Date of this return ne information in this return is made up to	
If you retu the a	Date of next return wish to make your next rn on a date earlier than anniversary of this return ase show the date here.	Day Month Year
Any change of registered office must be notified on Form LLP287.	Registered Office Show here the address as at the date of this return.	36 EAST STREET
	Post town County	BRISPORT DORSET POSTCODE DIB 32H
If there is a register		
debenture holders, of duplicate of any suregister or part of which is not kept at registered office, states	it, the County	UK Postcode
here where it is kept	List members o	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	M. Harrey Date 27-5-05
		Designated Member
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House.		I his return includes U continuation sheets.
		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 Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburg

for partnerships registered in Scotland

0446

24/05/05

or LP - 4 Edinburgh 2

Please list members	s 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.		Details of new members must be notified on form LLP288a
	Surname or Corporate Name	HARVEY
	Forename(s)	MICHAEL ANTHONY
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 residentials.	Address ^{††}	48 WEST ALLINGTON
	, Post town	BRIDBRT
	County / Region	DORSET UK DT6 58H Postcode
tial address. In the case of a corporation or Scottish	Country	ENGLAND Tick box if designated member
firm, give the regis- tered or principal office address.		
	Member Reference Number *(as advised	959 Date of Birth 0,40,7 1,9,5,4
* Maliantonia	by Companies House)	
* Voluntary information	•	
•		
Members 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	LOBB =
corporate or firm name.	Forename(s)	AMOREM ST JOHN
# Tick this box if	Address ^{††}	SOUTH MEAD FARMHOUSE
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		
	Post town	BRIDPORT
	County / Region	DORSET UK DTG 35P
address. In the case of a corpora-	Country	ENGLAND Tick box if designated member
tion or Scottish firm, give the registered or principal office		
address.		
	Member Reference	Day Month Year
	Number *(as advised by Companies House)	960 Date of Birth 25 012 119 43

Members

* Voluntary information