

00079 .LP363

> **Annual Return of a Limited Liability Partnership**

Please complete in typescript, COMPANIE HOUSE or in bold black capitals.

CHFP000

LP Number	00305212	
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Liability Partnership

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Full Name of Limited PRE-EMINENT SOLUTIONS LIMITED PARTN ERSHIP LIABILITY

Date of this return

The information in this return is made up to Month Year 2001

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

Ate Stables

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

PLUMTREE NOTINGHAM

County

NOTINGHAMSHIRE

Postcode NG12

UK

Postcode

CHURCH

SND

HILL

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

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

Designated Member

Date

2/8/04

When you have signed the return send it with the fee of £35 to the Registrar of Companies. Cheques should be made payable to Companies House.

> COMPANIES HOUSE 06/08/04

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

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

DX 235 Edinburgh or LP - 4 Edinburgh 2

10/03

Members		has		
	s in alphabetical order	·		
In the case of a member that is a		Details of new members must be notified on form LLP288a		
corporation or a Scottish firm, the name is the	Surname or Corporate Name	RELOIN 9		
corporate or firm name.	Forename(s)	RICHARD		
†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality	Address **	dress # FLAT 4A THE FLINTHAM		
		HINE HALL MAPPELLEY		
Order granted under section 723B of the Companies Act	Post town	NOTINGHAM		
1985 otherwise, give your usual residen-	County / Region	NOTING HAWWITHRE Postcode NG3 5PQ		
tial address. In the case of a corpora- tion or Scottish	Country	ENGLAND Tick box if designated member		
firm, give the regis- tered or principal office address.				
	Member Reference Number *(as advised	Day Month Year 20040 Date of Birth 2 6 1 0 (19 6 7		
* Voluntary information	by Companies House)	20040 Date of Birth 2 6 1 0 (19 6 7		
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.		Details of new members must be notified on form LLP288a		
	Surname or Corporate Name	LENNOX		
	Forename(s)	aboffrey		
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 ^{††}	WINDFIELD MAIN ROAD		
		OLD BRAMPTON		
	Post town	CHESTERRELD		
	County / Region	OERBYSHIRE Postcode 542 759		
	Country	ENGLAND Tick box if designated member		
address.				
	Member Reference r	Day Month Year		
	Number *(as advised	Date of Birth 2, a 0, 9, 1, 0, 5, 6		
	by Companies House)	Date of Birth 29091956		

* Voluntary information

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