

6/0/19/36

of a Limited Partnership

1	nies House		LLF
Please complete in typescript, or in bold black capitals.			Annual Return C Liability
CHWP000	LLP Number	OC306408	
	Full Name of Limited Liability Partnership	CAP PARTNERS LLP	100

The information in this return is made up to

Date of this return

Day Month Year 2 ١3 2 , 0

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

Any change of registered office must be notified on Form LLP287.

Registered Office Show here the address as at the date of this return.

1 DEVONSHIRE STREET Post town

LONDON

DEVONSHIRE HOUSE

County

W1W 5DR 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

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

UK

Postcode

5 March 2009

Designated Member

When you have signed the return send it

This return includes

continuation sheets.

(enter number)

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

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF143UZ

DX 33050 Cardiff

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



Members 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	BLOOM	
	Forename(s)	MARTIN	
Tick this box if the address shown	Address ⁺⁺	50 ETON COURT	
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		ETON AVENUE	
	Post town	LONDON	
	County / Region	Postcode NW3 3HJ	
	Country	Tick box if designated member	
firm, give the regis- tered or principal office address.			
* Voluntary information	Member Reference Number *(as advised by Companies House)	Day Month Year Date of Birth 1 0 0 1 1 9 5 2	
Members Please list members	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 corporate or firm name.	Surname or Corporate Name	CUMMINGS	
	Forename(s)	DAVID SCOTT	
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.	Address **	2 NIGHTINGALE SQUARE	
	Post town	LONDON	
	County / Region	Postcode SW12 8QN	
	Country	Tick box if designated member	
	Member Reference	Day Month Year	
	Number * (as advised	Date of Birth 0 5 0 9 1 9 5 7	

* Voluntary information

Please list members	in alphabetical order			
In the case of a member that is a corporation or a Scottish firm, the	Surname or Corporate Name	SNIALIER		
name is the corporate or firm name.	Forename(s)			
** Tick this box if Address **		3 SHAFTESBURY ROAD		
is a service address for the beneficiary				
of a Confidentiality Order granted under section 723B of the	Post town	CAMBRIDGE		
Companies Act 1985 otherwise, give your usual residen- tial address. In the case of a corpora- tion or Scottish firm, give the regis- tered or principal	County / Region	Postcode CB2 2BW		
	Country	Tick box if designated member		
* Voluntary information	Member Reference Number *(as advised by Companies House)	Day Month Year Date of Birth 1 9 0 1 1 9 6 6		
Members Please list members In the case of a member that is a	in alphabetical order	Details of new members must be notified on form LLP288a		
corporation or a Scottish firm, the	Surname or	STRAUB		
name is the corporate or firm name.	Corporate Name Forename(s)	ALEXANDER		
** Tick this box if	Address ⁺⁺	5 STANLEY GARDENS		
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	LONDON		
	County / Region	Postcode W11 2ND		
address. In the case of a corporation or Scottish firm, give the registered or principal office address.	Country	Tick box if designated member		
	Member Reference	Day Month Year		
	Number * (as advised by Companies House)	Date of Birth 1 4 0 6 1 9 7 2		

Members

* Voluntary information