

Please complete in typescript,

LLP363

Annual Return of a Limited Liability Partnership

or in bold black capitals.		Liability Partnership
CHWP000	LLP Number	OC 308155
	II Name of Limited ability Partnership	FORTRESS HOTELS LLP
	Date of this return e information in this return is made up to	Day Month Year O17 O6 1008
If you retur the a	Date of next return wish to make your next n on a date earlier than universary of this return use show the date here.	Day Month Year
Any change of registered office must be notified on Form LLP287.	Registered Office Show here the address	11 LAURA PLACE
	as at the date of this return.	GREAT PULTENCY STREET
	Post town	BATH
	County	SCYCRSET Postcode BA2 LABL
Register of Debenture Holders		
If there is a register debenture holders, or duplicate of any suc register or part of which is not kept at ti registered office, sta	a Post town	UK
here where it is kept	List members o	n 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 Marrier Date 19h yours 2009
When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House		This return includes continuation sheets. (enter number) When you have completed and signed the form please send it to the

20/01/2009 16 COMPANIES HOUSE 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

for partnerships registered in England and Wales or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for partnerships registered in Scotland

B DX 235 Edinburgh or LP - 4 Edinburgh 2

DX 33050 Cardiff

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	BOKENHAM
	Forename(s)	MICHAEL CLIFTON THOMAS
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 corpora-	Address **	SOUTH PARK LONGE CARLTON ROAD
		South GODSTONE
	Post town	GODSTONE
	County / Region	SURREY Postcode RH9 8LD
	Country	ン・に Tick box if designated member
tion or Scottish firm, give the regis- tered or principal office address.		
	Member Reference Number *(as advised	Day Month Year 3388 Date of Birth [16 0 7 19 4 3
* Voluntary information	by Companies House)	
Members Please list members	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	BROOKES
corporate or firm name.	Forename(s)	ALAN MARCUS
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 **	EXTON LODGE
		MILL LANE EXTON
	Post town	EXETER
	County / Region	DEVON Postcode EX3 OPI
	Country	フレス Tick box if designated member
	Member Reference	Day Month Year
	Number *(as advised by Companies House)	33887 Date of Birth 0,90,21943

* Voluntary information