

17/01/2009

**COMPANIES HOUSE** 

## **LLP363**

Please complete in type or in bold black capitals		Annual Return of a Limited Liability Partnership
CHWP000	LLP Number	
	me of Limited by Partnership	Fairmle Partnership 1 LLP
	of this return mation in this return is made up to	11 1 1 27 1 1 7 11 7 17 11 1 1 1 2 1
If you wish return on a the anniver	of next return to make your next a date earlier than sary of this return ow the date here.	Day Month Year
Any change of Show	here the address as at the date of this return.  Post town	The Clock Tower Office No. 5 Churcham Basingstone
	County	Hampshire Postcode 129248BQ.
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
•	ist members c	· • //
	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 15/1/09
When you have signed twith the fee to the Registr		This return includes continuation sheets.
SATURDAY.	W.	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 Edinburgh

for partnerships registered in Scotland

or LP - 4 Edinburgh 2

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh

## Pléase 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 International Gredit (eli) Corporate Name name is the corporate or firm Forename(s) name. Address # # Tick this box if och the address shown is a service address for the beneficiary of a Confidentiality Order granted under Post town section 723B of the Companies Act UΚ 1985 otherwise, give County / Region NG24 XBQ Postcode your usual residential address. In the Tick box if designated member Country case of a corporation or Scottish firm, give the registered or principal office address. Day Month Year Member Reference Date of Birth Number \*(as advised 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 OKUU BARBILO TAUESTMONIA Corporate Name name is the corporate or firm Forename(s) name. Address \*\* # Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under Post town section 723B of the UK Companies Act 1985 KTUPO County / Region Moi Postcode otherwise, give your usual residential Tick box if designated member address. In the Country case of a corporation or Scottish firm, give the registered or principal office address. Year Day Month Member Reference Date of Birth Number \*(as advised

by Companies House)

\* Voluntary information

Members

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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	Trumph Partnerships (un) Ital
	Forename(s)	
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	Address **	The clock Tower
		Office Nos Christian
	Post town	Basinghole
	County / Region	Postcode VCG24 813Q
	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
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	
	Forename(s)	
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	Post town	
	County / Region	Postcode
	Country	Tick box if designated member
give the registered or principal office address.		
	Member Reference	Day Month Year
	Number *(as advised by Companies House)	Date of Birth

\* Voluntary information