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0 7 /111M 2000	FEE PAID Annual Poturn of a Limited
Please complete in typescrip ONPANIE or in bold black capitals.	Liability Partnership
CHFP010 LLP Number	OC313378
Full Name of Limited Liability Partnership	Heath West LLP
Date of this return The information in this return is made up to	Day Month Year 2 3 0 5 2 0 0 6
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
Registered Office Show here the address as at the date of this return.	66 Wigmore Street
Any change of registered Post town office must be notified on	London
form LLP287. County	Postcode W1U 2SB
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 Post town	
office, state here where it is kept. County	UK
-	ers 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.
When you have signed the return send it with the fee to the Registrar of Companies. Check the made navable to Con A35 **AVABSC2.J** 187	Date /b/1/06 Designated Member This return includes 3 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

187 07/06/2006 COMPANIES HOUSE 673 **COMPANIES HOUSE** 23/05/2006

Companies House, Crown Way, Cardiff, CF14 3UZ

for partnerships registered in England and Wales or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh or LP - 4 for partnerships registered in Scotland

Edinburgh 2

'Members Please list members in alphab	petical order.	
In the case of a member that is a corporation or a Scottish firm the name is the corporate or	is	Details of new members must be notified on form LLP288a Ledley - as Trustee for the Betty Stein 1997 Sett for
firm name.	Forename(s)	James Daniel
†† Tick this box if the address shown is a	Address ††	551 5th Avenue
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		
	Post town	New York 10176
	County / Region	New York Postcode
	Country	USA Tick box if designated member
registered or principal office address.		
Member Reference Number *(as advised by Companies House)		Day Month Year Date of 0 6 0 4 1 9 4 7 Birth
* Voluntary Information	,	
Members Please list members in alpha	hatical order	
In the case of a member that		Details of new members must be notified on form LLP288a
a corporation or a Scottish firm, the name is the corporate or firm name.		Stein West End (Cayman) Limited
	Forename(s)	
†† Tick this box if the address shown is a	Address ††	Clifton House, Fort Street
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	Post town	Georgetown
	County / Region	Grand Cayman UK Postcode
	Country	Grand Cayman Tick box if designated member
registered or principal office address.		Day Month Year
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advised by Companies House)		Birth !



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a corporation or a Scottish firm, the name is the corporate or	041,141110	Stein		
firm name.	Corporate Name			
	Forename(s)	Jonathan		
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†† Tick this box if the address shown is a	Address ††	27 Norfolk Road		
service address for				
the beneficiary of a				
Confidentiality Order Granted under section	Doot town			
723B of the	Post town	London	_	
Companies Act 1985 otherwise, give your	County / Region	UK NW8 6AU		
usual residential	County / Region	Postcode 11110 0710	_	
address. In the case	Country	United Kingdom Tick box if designated member	_	
of a corporation or Scottish firm, give the	, ,		!	
registered or principal				
office address.		Dec. Mostle Vers		
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In the case of a member that	15	Details of new members must be notified on form LLP288a		
a corporation or a Scottish firm		Stein		
the name is the corporate or firm name.	Corporate Name	Occin	_	
	Forename(s)	Sally Anne		
	` '		_	
†† Tick this box if the	Address ††	27 Norfolk Road		
address shown is a service address for				
the beneficiary of a				
Confidentiality Order				
granted under section 723B of the	Post town	London		
Companies Act 1985		UK		
otherwise, give your usual residential	County / Region	Postcode NW8 6AU		
address. In the case	O	United Kingdom Tick box if designated member	7	
of a corporation or	Country	United Kingdom Tick box if designated member Y		
Scottish firm, give the registered or principal				
office address.				
		Day Month Year		
Member Reference Number *(as			3	
advise	ed by Companies House)	Birth Birth		
* Voluntary Information				

