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## **LLP363**

Please complete in typescript, or in bold black capitals.

Annual Return of a Limited
Liability Partnership

OUTDOAS				
CHFP010	LP Number	OC313378		
Full Name of Limited Liability Partnership		Heath West LLP		
<b>D</b> .4	* 4L ! 4	Day Month Year		
Date of this return The information in this return is made up to  Date of next return		2,30,52,0,0,9		
		Day Month Year		
If you wish to make your next return on a date earlier than the anniversary of this				
return please show the date here.				
D. a. start				
Registered Office Show here the address as at the date of this return.		66 Wigmore Street		
Any change of registered office must be notified on form LLP287.	Post town	London		
	County	Postcode W1U 2SB		
Register of Debente	ure 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			
		UK		
	County	Postcode		
	List membe	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.		
	Signed	Date 17.8.09		
When you have signed the return send it		Designated Member		

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

\*ABQ2TCJ1\*
A41 19/08/2009 97

**COMPANIES HOUSE** 

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

3

Companies House, Crown Way, Cardiff, CF14 3UZ 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 Edinbu

This return includes

DX 235 Edinburgh or LP - 4 Edinburgh 2

continuation sheets.

<b>Members</b> Please list members in alphabetical order.				
the name is the comprete or	ırname or	I Central Securities Limited		
firm name.	ate Name [_			
For	ename(s)			
address shown is a	Idress ††	66 Wigmore Street		
service address for the beneficiary of a Confidentiality Order				
granted under section 723B of the Companies Act 1985	Post town 1	London		
	/ / Region	Postcode W1U 2SB		
address. In the case of a corporation or	Country	Tick box if designated member		
Scottish firm, give the registered or principal office address.	<del>-</del>			
		Day Month Year		
Member Reference N advised by Compa		Date of Birth		
* Voluntary Information				
Members Please list members in alphabetical order.				
In the case of a member that is		Details of new members must be notified on form LLP288a		
the name is the semerate or		James Ledley as Trustee for Betty Stein 1997 Sett for Daniel		
For	ename(s)			
address shown is a	idress ††	551 5th Avenue		
service address for				
the beneficiary of a Confidentiality Order				
Confidentiality Order granted under section 723B of the	Post town	New York		
Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential		New York  New York 10176  UK Postcode		
Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corporation or	y / Region	New York 10176		
Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case	y / Region	New York 10176 UK Postcode		
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	y / Region Country	New York 10176 UK Postcode		



Members Please list members in alpha		Details of new members must be r	notified on form LL P288a
In the case of a member that a corporation or a Scottish fit the name is the corporate or firm name.	<sup>rm,</sup> Surname or 1	S.G. Consultants Holdings	
min name.	Forename(s)		
†† Tick this box if the address shown is a	Address ††	66 Wigmore Street	
service address for the beneficiary of a Confidentiality Order			
granted under section 723B of the	Post town	London	
Companies Act 1985 otherwise, give your usual residential	County / Region		UK W1U 2SB
address. In the case of a corporation or Scottish firm, give the	Country		Tick box if designated member
registered or principal office address.			
Membe	er Reference Number *(as		Day Month Year
advised by Companies House)  * Voluntary			Birth
Information			•
Members Please list members in alpha	abetical order.		- 4/5/ 1 5 1 1 DO 00-
In the case of a member tha a corporation or a Scottish fi	rm, Surname or	Details of new members must be r	
the name is the corporate or firm name.	Corporate Name	Stein West End (Cayman) Li	imited
	Forename(s)		
†† Tick this box if the address shown is a service address for	Address ††	Clifton House, Fort Street	
the beneficiary of a Confidentiality Order			
granted under section 723B of the Companies Act 1985	Post town	Georgetown	
otherwise, give your usual residential	County / Region	Grand Cayman	UK Postcode
address. In the case of a corporation or Scottish firm, give the	Country	Grand Cayman	Tick box.if designated member x
registered or principal office address.			
Member Reference Number *(as			Day Month Year  Date of
advis * Voluntary	ed by Companies House)		Birth L
Information			



Members Please list members in alph	abetical order.	
In the case of a member that a corporation or a Scottish f	_	Details of new members must be notified on form LLP288a
the name is the corporate or firm name.	· Guillaille Oi	Stein
	Forename(s)	Jonathan
†† Tick this box if 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 ††	27 Norfolk Road
	Post town	London
	County / Region	Postcode NW8 6AU
	Country	Tick box if designated member x
Member Reference Number *(as		Day Month Year  Date of 0 3 0 1 1 9 5 4
* Voluntary Information		Birth V V V V V V V V V V V V V V V V V V V
Members Please list members in alph In the case of a member tha		Details of new members must be notified on form LLP288a
a corporation or a Scottish fin the name is the corporate or firm name.	irm, Surname or	Stein
	Forename(s)	Sally Anne
†† Tick this box if 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 ††	27 Norfolk Road
	Post town	London
	County / Region	Postcode NW8 6AU
	Country	Tick box if designated member x
Member Reference Number *(as		Day Month Year  Date of 1 0 0 0 1 0 6 0
advised by Companies House) * Voluntary		Birth 1 9 0 2 1 9 6 3
Information		

