



LLP363

Please complete in typescript,
or in bold black capitals.

Annual Return of a Limited Liability Partnership

CHFP036

LLP Number

OC314708

Full Name of Limited
Liability Partnership

WENSLEYDALE ESTATES LLP

Date of this return

The information in this return
is made up to

Day Month Year

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 1 | 6 | 0 | 8 | 2 | 0 | 0 | 9 |
|---|---|---|---|---|---|---|---|

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.

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

OAKMOUNT

6 EAST PARK ROAD

Post town

BLACKBURN

County

LANCASHIRE

UK
Postcode

BB1 8BW

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

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

24.08.09.

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

This return includes

1

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
for partnerships registered in England and Wales

or

DX 33050 Cardiff

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB
for partnerships registered in Scotland

DX 235 Edinburgh
or LP - 4 Edinburgh 2



A25

A92WDCQW

26/08/2009

377

COMPANIES HOUSE

WEDNESDAY

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.

↑ ↑ 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.

☐

Details of new members must be notified on form LLP288a

| | | | |
|---------------------------|------------------|-------------------------------|-------------------------------------|
| Surname or Corporate Name | HANCOCK | | |
| Forename(s) | MARK EDWARD | | |
| Address ↑ ↑ | THE OLD VICARAGE | | |
| | ARNCLIFFE | | |
| Post town | SKIPTON | | |
| County / Region | NORTH YOURKSHIRE | UK Postcode | BD23 5QD |
| Country | ENGLAND | Tick box if designated member | <input checked="" type="checkbox"/> |

Member Reference Number *(as advised by Companies House)

36359

Date of Birth

| Day | Month | Year |
|-----|-------|------|
| 0 | 4 | 1 |
| 0 | 4 | 9 |
| 6 | | 5 |

* Voluntary information

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.

↑ ↑ 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.

☐

Details of new members must be notified on form LLP288a

| | | | |
|---------------------------|-------------------------|-------------------------------|-------------------------------------|
| Surname or Corporate Name | KERR | | |
| Forename(s) | ADAM CHARLES | | |
| Address ↑ ↑ | SNAIL HALL | | |
| | MILLWODD ROAD, POLSTEAD | | |
| Post town | COLCHESTER | | |
| County / Region | SUFFOLK | UK Postcode | CO6 5AU |
| Country | ENGLAND | Tick box if designated member | <input checked="" type="checkbox"/> |

Member Reference Number *(as advised by Companies House)

17018

Date of Birth

| Day | Month | Year |
|-----|-------|------|
| 1 | 9 | 1 |
| 0 | 6 | 9 |
| 6 | | 6 |

* Voluntary information

Please complete in typescript,
or in bold black capitals.

CHFP036

LLP363 cont

Annual Return (continuation sheet)

LLP Number **OC314708**

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

† † 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.

| | | | |
|---------------------------|-------------------------|---|----------------|
| Surname or Corporate Name | RIDEHALGH | | |
| Forename(s) | JONATHAN MARK | | |
| Address † † | BURNT HOUSE FARM | | |
| | BLACKO | | |
| Post town | NELSON | | |
| County / Region | LANCASHIRE | UK Postcode | BB9 6RG |
| Country | ENGLAND | Tick box if designated member <input checked="" type="checkbox"/> | |

Member Reference Number *(as advised by Companies House)

36357

Date of Birth

| Day | Month | Year |
|----------|----------|----------|
| 2 | 8 | 0 |
| 2 | 1 | 9 |
| 6 | 7 | |

* Voluntary information

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

† † 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.

| | | | |
|---------------------------|--|--|--|
| Surname or Corporate Name | | | |
| Forename(s) | | | |
| Address † † | | | |
| | | | |
| Post town | | | |
| County / Region | | UK Postcode | |
| Country | | Tick box if designated member <input type="checkbox"/> | |

Member Reference Number *(as advised by Companies House)

Date of Birth

| Day | Month | Year |
|-----|-------|------|
| | | |
| | | |
| | | |

* Voluntary information