

Please complete in typescript, or in bold black capitals.

LLP363

Annual Return of a Limited Liability Partnership

or in bold black c	apitals.		Liability Partnership
CHWP000	LLP Number	OC316469	
	ull Name of Limited iability Partnership	PARICINT LLP	
т	Date of this return The information in this return Is made up to	Day Month Year 0 6 0 3 2 0 0 9	
retu the	Date of next return u wish to make your next urn on a date earlier than anniversary of this return ease show the date here.	Day Month Year	
Any change of	an ar are acted 4:	NO. 4	
egistered office nust be notified on		19 BUCKINGHAM STREET	
Form LLP287.	Post town		
	County	LONDON	UK Postcode WC2N 6EG
	Register of Debenture Holders		
there is a registe ebenture holders, of uplicate of any se egister or part of thich is not kept at egistered office, si	or a uch Post town f it, the		UK Postcode
ere where It is kept	List members o	on page 2	· ·
		As a designated member I certify that true to the best of my knowledge and	
	Signed	Designated Member	Date \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
ith the fee to the	gned the return send it Registrar of Companies. be made pavahle to	This return includes 1	continuation sheets.
VEDNESDAY	AHJF0896* 8/03/2009 66 PANIES HOUSE	When you have completed and signe Registrar of Companies at: Companies House, Crown Way, Card for partnerships registered in England ar Companies House, 37 Castle Terrace for partnerships registered in Scotland	liff, CF14 3UZ DX 33050 Cardi

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 corporate or firm name.	Surname or Corporate Name	ANDERSON		
	Forename(s)	GRAHAM		
th Tick this box if the address shown is a	Address ††	II DA GAMMA PLACE		
service address for the beneficiary of a Confidentiality Order				
granted under section 723B of the Companies Act 1985	Post town	LONDON		
otherwise, give your usual residential	County / Region	LONDON Postcode E14 3QQ		
address. In the case of a corporation or Scottlish firm, give the registered or principal	Country	ENGLAND Tick box if designated member		
office address.	Member Reference Number *(as advised	Day Month Year Date of Birth 011 013 119171		
* 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	HOLMES /		
corporate or firm name.	Forename(s)	ANDREW JULIAN		
11 Tick this box if the address shown is a	Address **	1 SPRING PELD PLACE		
the beneficiary of a Confidentiality Order		THE STREET		
granted under section 723B of the Companies Act 1985	Post town	OLD BASING		
otherwise, give your usual residential address. In the case	County / Region	Postcode RG24 7DR		
of a corporation or Scottish firm, give the registered or principal office address.	Country	ENGLAND Tick box if designated member		
* Voluntary information	Member Reference Number *(as advised by Companies House)	Day Month Year Date of Birth 18091965		

Please complete in typescript, or in bold black capitals.

LLP363 cont

CHWP000

04/02

Annual Return (continuation sheet)

	LLP Number	OC316469		
Members (Please	e list members in alpha	betical order)		
In the case of a member that is a corporation or a Scottish firm, the name is the corporate or firm name. It 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	JONES		
	Forename(s)	PAMELA MARY		
	Address ^{††}	NO. 4		
		19 BUCKINGHAM STREET		
	Post town			
	County / Region	LONDON UK Postcode WC2N 6EG		
	Country	Tick box if designated member		
	Member Reference Number *(as advised by Companies House)	Day Month Year Day Month Year Day Month Year 1 2 0 8 1 9 6 0		
* Voluntary information				
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	PAM JONES LIMITED		
corporate or firm name.	Forename(s)			
it 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 ††	NO. 4		
		19 BUCKINGHAM STREET		
	Post town			
	County / Region	LONDON UK Postcode WC2N 6EG		
	Country	Tick box if designated member		
	Member Reference	Day Month Year		
* Voluntary Information	Number *(as advised by Companies House)	64084 Date of Birth		