

Please complete in typescript, or in bold black capitals.

## **LLP363**

Annual Return of a Limited Liability Partnership

| CHWP000   |  |                              | Liability Partnership   |
|---|--|------------------------------|---|
| CHYPUUU   | LLP Nu   | mber                         | ac 318732   |
|   | Full Name of Lir<br>Liability Partne   |                              | 1   |
|   | Date of this re<br>The information in this<br>is mad   |                              | 219 213 2191218   |
|   | Date of next re<br>you wish to make you<br>return on a date earlie<br>he anniversary of this<br>please show the date | ır next<br>er than<br>return | Day Month Year  |
| Any change of registered office must be notified Form LLP287.   | 40 <b>41 11.0 41</b>   | dress<br>ate of              | 91 GLEBELANDS MAND PRESTWICHT   |
|   | Post   | town                         | VEANCHESTER   |
|   | C  | ounty                        | Postcode 725/8VF.   |
|   | Registe<br>Debenture Hole  |                              |   |
| If there is a regi<br>debenture holder<br>duplicate of any<br>register or part<br>which is not kept<br>registered office<br>here where it is ke | s, or a r such Post of it, at the r state  | town<br>ounty                | UK Postcode   |
|   | List memb  | ers o                        | on page 2   |
|   | Certifi  | cate                         | As a designated member I certify that the information given in this return is true to the best of my knowledge and belief.                                    |
| WEDNESDAY   | *A6FQH8U4*   |                              | Designated Member  This return includes Continuation sheets.  |
| A06   | 08/04/2009<br>COMPANIES HOUSE  | 85                           | (enter number)  |
|   | 31/03/2009<br>COMPANIES HOUSE  | 386                          | Vhen you have completed and signed the form please send it to the Registrar of Companies at:  Dompanies House, Crown Way, Cardiff, CF14 3UZ  DX 33050 Cardiff |
| A14   | *A2REJ75C*   |                              | for partnerships registered in England and Wales or   |
| A56   | • •  |                              | Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh for partnerships registered in Scotland or LP - 4 Edinburgh                           |

| Please list memb   | ers in alphabetical order               | '   |
|--|---|---|
| In the case of a<br>member that is a<br>corporation or a                             |   | Details of new members must be notified on form LLP288a |
| Scottish firm, the name is the   | Surname or<br>Corporate Name            | BIRKINSHAN  |
| corporate or firm<br>name.   | Forename(s)                             | DAVID JOHN  |
| Tick this box if the address shown   | Address #                               | 5 WESTGATE  |
| is a service address<br>for the beneficiary<br>of a Confidentiality                  |   | UR1 STW   |
| Order granted under section 723B of the  | Post town                               | MANCHESTOR  |
| Companies Act<br>1985 otherwise, give<br>your usual residen-                         | County / Region                         | Postcode M41 9EL  |
| tial address. In the<br>case of a corpora-<br>tion or Scottish                       | Country                                 | ENELAND Tick box if designated member                   |
| firm, give the regis-<br>tered or principal<br>office address.                       |   |   |
|  |   | Day Month Year  |
|  | Member Reference<br>Number *(as advised | Date of Birth 0 2 9 3 / 19 6 4                          |
|  | by Companies House) <sup>l</sup>        | 0413/1/94   |
| * Voluntary information  |   |   |
| Members Please list member   | rs in alphabetical order                |   |
| In the case of a<br>member that is a<br>corporation or a                             | 1<br>-                                  | Details of new members must be notified on form LLP288a |
| Scottish firm, the name is the   | Surname or Corporate Name               | COUEHLAN  |
| corporate or firm<br>name.   | Forename(s)                             | MONICA ISABELLE BRIDGET                                 |
| # Tick this box if   | Address                                 | NEWLANDS  |
| the address shown is a service address for the beneficiary                           | · [                                     | STATION ROAD  |
| of a Confidentiality Order granted under section 723B of the                         | Post town                               | MALPLE  |
| Companies Act 1985 otherwise, give your  | County / Region                         | Postcode SK6 6 PA.                                      |
| usual residential<br>address. In the<br>case of a corpora-<br>tion or Scottish firm, | Country                                 | ENE LAW 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 22021966                                  |
| * Voluntary  | = / = =                                 |   |
| information  | Tr.                                     |   |

| Please list member   | ers in alphabetical order                  |   |
|--|--|---|
| In the case of a<br>member that is a<br>corporation or a   |  | Details of new members must be notified on form LLP288a |
| Scottish firm, the name is the   | Surname or<br>Corporate Name               | BENZIE  |
| corporate or firm<br>name.   | Forename(s)                                | ALAN ATHOL EMSKIE                                       |
| <sup>††</sup> Tick this box if<br>the address shown  | Address #                                  | HIGHER HOUSE BARN                                       |
| is a service address<br>for the beneficiary<br>of a Confidentiality  |  | HOCKER LANE   |
| Order granted under<br>section 723B of the   | Post town                                  | OVER ALDERLEY   |
| Companies Act<br>1985 otherwise, give<br>your usual residen-   | County / Region                            | Postcode SKIO 4SI)                                      |
| tial address. In the<br>case of a corpora-<br>tion or Scottish   | Country                                    | EN FLAVID Tick box if designated member                 |
| firm, give the regis-<br>tered or principal<br>office address.   |  |   |
|  |  |   |
|  | Member Reference<br>Number *(as advised    | Day Month Year  Date of Birth 015 1191417               |
|  | by Companies House)                        | Date of Birth 05 95 1947                                |
| * Voluntary information  |  |   |
| Members Please list membe  | rs 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<br>Scottish firm, the<br>name is the  | Surname or Corporate Name                  |   |
| corporate or firm<br>name.   | Forename(s)                                |   |
| <sup>††</sup> Tick this box if   | Address <sup>††</sup>                      |   |
| the address shown is a service address for the beneficiary   |  |   |
| of a Confidentiality<br>Order granted under<br>section 723B of the   | Post town                                  |   |
| Companies Act 1985 otherwise, give your  | County / Region                            | UK Postcode   |
| usual residential address. In the case of a corporation or Scottish firm, give the registered or principal office address. | Country                                    | Tick box if designated member                           |
|  |  | Day Month Year  |
|  | Member Reference                           |   |
|  | Number * (as advised   by Companies House) | Date of Birth   |

\* Voluntary information

| BUDEN  Post town ATRINCHAM  Ve County / Region CHSHIRS Postcode WA 14 2 LQ  Country ENCLAND Tick box if designated member  | In the case of a<br>member that is a  | s in alphabetical order  |   |
|--|---|--|---|
| Surname or Corporate Name  Forename(s)  Address ** ZD EART DOWN NOAM  BUDEN  BUDEN  Post town  ATRINCHAM  Country Region  CHESHIRF  Postcode  Tick box if designated member  | member that is a  |  |   |
| Corporate Name  Forename(s)  Address **  ZO CAST DOWN  BUDGW  Post town  ATRINCHAM  County / Region  CHESHIRS  Tick box if designated member   |   |  | Details of new members must be notified on form LLP288a   |
| Address # ZD EAST DOWN ROAM  BUDEN  Post town ATRINCHAM  County/Region CHSSH, RS Postcode WA 14 2LQ  Country ENGLAND Tick box if designated member   | Scottish firm, the name is the  | · ·  | BATE  |
| Post town  ATRINCHAM  Ve County / Region CHSSHIRS  Country  Countr | corporate or firm name.   | Forename(s)  | SIMON DONALD  |
| BUDEN  Post town ATRINCHAM  Ve County / Region CHSHIRS Postcode WA 14 2 LQ  Country ENCLAND Tick box if designated member  | †† Tick this box if   | Address **   | ZO EAST DOUNG ROAM  |
| Post town  ATRINCHAM  Ve County / Region  CHSH, Region  CHSH, Region  Tick box if designated member  | is a service address for the beneficiary  |  | BUDEN   |
| Country Region CHSHI (25 Postcode WA 14 2 L Q  Country ENGLAND Tick box if designated member   | Order granted under<br>section 723B of the  | Post town  | ALTRINCHAM  |
| Country ENCLOSE TICK box if designated member  | Companies Act<br>1985 otherwise, give<br>your usual residen-  | County / Region  |   |
| ;-   | tial address. In the case of a corpora-<br>tion or Scottish   | Country  | Tick box if designated member   |
|  | firm, give the regis-<br>tered or principal   |  |   |
|  | omee address.   |  |   |
| Day Month Year   |   | Member Reference   |   |
|  |   | Number *(as advised   by Companies House)                                | Date of Birth 11 03 1 9 58  |
| Number *(as advised Date of Birth / 1/2 2 / 6 / 5  | * Voluntary<br>Information  |  |   |
| Number *(as advised Date of Birth / 1/2 2 / 6 / 5  |   |  |   |
| Number *(as advised Date of Birth / 1/2 2 / 6 / 5  |   |  |   |
| Number *(as advised Date of Birth / 1/2 2 / 6 / 5  |   | in alphabetical order  |   |
| Number *(as advised Date of Birth / 1/2 2 / 6 / 5  | In the case of a<br>member that is a  | ı  | Details of new members must be notified on form LLP288a   |
| Number *(as advised by Companies House)  Date of Birth   | corporation or a<br>Scottish firm, the<br>name is the   | Surname or Corporate Name  | PARKER  |
| Number *(as advised by Companies House)  Date of Birth   | corporate or firm<br>name.  | Forename(s)  |   |
| Number *(as advised by Companies House)  Date of Birth  II 031758  ers in alphabetical order  Details of new members must be notified on form LLP288a  Surname or Corporate Name  PARKER   |   |  | 17 BUENSIDE AVONUE  |
| Number *(as advised by Companies House)  Date of Birth  II 031758  ers in alphabetical order  Details of new members must be notified on form LLP288a  Surname or Corporate Name  PARKER   | <sup>††</sup> Tick this box if  | Address **   | _ ·   |
| Date of Birth  | the address shown is a service address  | Address #  |   |
| Date of Birth  | the address shown is a service address for the beneficiary of a Confidentiality Order granted under   | [  | STOCKTON HEATH  |
| Number * (as advised by Companies House)  Details of new members must be notified on form LLP288a  Surname or Corporate Name  Forename(s)  ANDRON STEPHON  Address **  Post town  Post town  WARRING TOWN  County / Region  County  | 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   | Post town  | STOCKTON HEATH WARRINGTON   |
| Number *(as advised by Companies House)  Patails of new members must be notified on form LLP288a  Surname or Corporate Name Forename(s)  Address **  Post town  County / Region  Country  Forename (S)  Country  Country  Forename (S)  Country  Country  Country  Country  Country  Country  Date of Birth  I I O 3 I A S 8   | 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 corpora-  | Post town  County / Region   | STOCKTON HEATH WARRINGTON CHESHIRS Postcode WA4 2AW   |
| Number *(as advised by Companies House)  Patails of new members must be notified on form LLP288a  Surname or Corporate Name Forename(s)  Address **  Post town  County / Region  Country  Forename (S)  Country  Country  Forename (S)  Country  Country  Country  Country  Country  Country  Date of Birth  I I O 3 I A S 8   | 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   | Post town  County / Region   | STOCKTON HEATH WARRINGTON CHESHIRS Postcode WA4 2AW   |
| Number *(as advised by Companies House)  Patails of new members must be notified on form LLP288a  Surname or Corporate Name Forename(s)  Address **  Post town  County / Region  Country  Forename (S)  Country  Country  Forename (S)  Country  Country  Country  Country  Country  Country  Date of Birth  I I O 3 I A S 8   | 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                     | Post town  County / Region   | STOCKTON HEATH WARRINGTON CHESHIRS Postcode WA4 2AW   |
| Post town  Country Region  Country Reference  Details of new members must be notified on form LLP28A  Date of Birth  II 018 I FI S 8  II 018 I | 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 | Post town County / Region Country  | STOCKTON HEATH  WARLINGTON  CHESHIRS Postcode WA4 2AW  ENGAND Tick box if designated member  Day Month Year |
| Date of Birth II 018 I FI S 8  ers in alphabetical order  Details of new members must be notified on form LLP288a  Surname or Corporate Name Forename(s) ANDRW SPHAW  Address T JUNGIUS AVWUS  STOCKTON HATH  Post town WARLINGTON  County / Region CHESHIRS Postcode WALL ZAW  Country ENGAND Tick box if designated member   | 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 | Post town County / Region Country  Member Reference Number *(as advised) | STOCKTON HEATH  WARLINGTON  CHESHIRE Postcode WA4 2AW  ENGAND Tick box if designated member  Day Month Year |
| Day Month Year   | Voluntary information  Members Please list members  | Number *(as advised by Companies House)                                  |   |
|  |   |  |   |
|  | tion or Scottish<br>firm, give the regis-   | ·  | ENGLATOR  |
|  | tial address. In the  | · - [  | Tiel be wife desired and the first  |
| Country Tick box if designated member  | Companies Act<br>1985 otherwise, give   | !<br>[   | UK LOW 2.0  |
| Country Region CHSH, Res Duk Postcode WA 14 2 LQ  Country ENGLAND Tick box if designated member  | of a Confidentiality Order granted under  | Post town  |   |
| Post town  ATRINCHAM  Ve County / Region  CHESHIRS  Postcode  WA 14 2 L Q  Tick box if designated member   |   |  |   |
| Post town  ATRINCHAM  Ve County / Region CHSSHIRS  Country  Countr |   | Address **   |   |
| Address # ZD EAST DOWN ROAM  BUDEN  Post town ATRINCHAM  Ve County / Region CHSHIRF Postcode WA 14 2 LQ  Country ENGLIND Tick box if designated member   | corporate or firm   | ·  |   |
| Forename(s)  SIMON DONALD  Address ** ZD EAST DONALD  BUDEN  Post town ATRINCHAM  County/Region CHSSHIRS Postcode WA 14 24 Q  Country ENGLIND  Tick box if designated member   | •   | · ·  | BATE  |
| Surname or Corporate Name  Forename(s)  Address ** ZD EART DOWN NOAM  BUDEN  BUDEN  Post town  ATRINCHAM  Country Region  CHESHIRF  Postcode  Tick box if designated member  |   |  | Details of new members must be notified on form LLP288a   |
| Surname or Corporate Name  Forename(s)  Address ** ZD EART DOWN NOAN  BUDEN  Post town  ATRINCHAM  Country Region  CHSHIRF  Postcode  Tick box if designated member  | member that is a  |  |   |
| Details of new members must be notified on form LLP288a  Surname or Corporate Name  Forename(s)  Address # ZD CAST DOWN NOAN  BUDEN  Post town  ATRINCHAM  Country Region  CHESHIRF Postcode WA 14 2 L Q  Tick box if designated member  | In the case of a<br>member that is a  | •  |   |
| Address # ZD EAST DOWN ROAM  BUDEN  Post town ATRINCHAM  Ve County / Region CHSH, RF Postcode WA 14 2 L Q  Country ENGLAND Tick box if designated member   | Scottish firm, the name is the corporate or firm  | Corporate Name   | BATE  |

प्रदेश प्रदेशी

| Members  |   | and the second s |
|--|---|--|
|  | ers in alphabetical order               |  |
| In the case of a<br>member that is a<br>corporation or a   |   | Details of new members must be notified on form LLP288a  |
| Scottish firm, the name is the   | Surname or<br>Corporate Name            | HUCKNALL   |
| corporate or firm<br>name.   | Forename(s)                             | MICHAELJAM=5   |
| <sup>††</sup> Tick this box if the address shown   | Address **                              | SOUTHCROST BURHILL ROAD  |
| is a service address<br>for the beneficiary<br>of a Confidentiality  |   | HERSHAM  |
| Order granted under<br>section 723B of the<br>Companies Act  | Post town                               |  |
| 1985 otherwise, give<br>your usual residen-<br>tial address. In the  | County / Region                         | Postcode KT12 4BE.   |
| case of a corpora-<br>tion or Scottish<br>firm, give the regis-<br>tered or principal<br>office address.                           | Country                                 | ENG-AND Tick box if designated member  |
|  | Member Reference                        | Day Month Year   |
|  | Number *(as advised by Companies House) | Date of Birth 0 8 0 6 1960   |
| * Voluntary information  |   |  |
| Members Please list member In the case of a member that is a   | s in alphabetical order                 | Details of new members must be notified on form LLP288a  |
| corporation or a<br>Scottish firm, the   | Surname or                              | DODD   |
| name is the<br>corporate or firm<br>name.  | Corporate Name  <br>Forename(s)         | ANDRON GORARA  |
| Tick this box if   | Address **                              | COURT ESSINGTON  |
| the address shown is a service address for the beneficiary   | _ [                                     | からんり   |
| of a Confidentiality<br>Order granted under<br>section 723B of the   | Post town                               | BATI+  |
| Companies Act 1985<br>otherwise, give your   | County / Region                         | Postcode BAZ75X  |
| usual residential<br>address. In the<br>case of a corpora-<br>tion or Scottish firm,<br>give the registered<br>or principal office | Country                                 | ENGAVI) Tick box if designated member  |
| address.   |   | •  |
|  | Member Reference<br>Number *(as advised | Day Month Year  Date of Birth 2 C 19 19 5  |
| * Voluntary  | by Companies House)                     |  |
| information  | *:                                      |  |

भाग्यतः सर्वतः द्व

| Members<br>Please list membe  | ers in alphabetical order                                      |   |
|---|--|---|
| In the case of a<br>member that is a<br>corporation or a  |  | Details of new members must be notified on form LLP288a |
| Scottish firm, the name is the  | Surname or<br>Corporate Name                                   | CROWTHER  |
| corporate or firm<br>name.  | Forename(s)  | STEVEN ANDREW   |
| Tick this box if the address shown  | Address #  | 24 MOUNT PEASANT  |
| is a service address<br>for the beneficiary<br>of a Confidentiality   |  | Simi sid  |
| Order granted under<br>section 723B of the<br>Companies Act   | Post town  | Presincht -   |
| 1985 otherwise, give<br>your usual residen-<br>tial address. In the   | County / Region  | MANCHESTA Postcode M25 251)                             |
| case of a corpora-<br>tion or Scottish<br>firm, give the regis-   | Country  | Tick box if designated member                           |
| tered or principal office address.  |  |   |
| ,   | Member Reference<br>Number *(as advised<br>by Companies House) | Day Month Year  Date of Birth 15071961                  |
| * Voluntary information   | ,,   |   |
| <b>Members</b><br>Please list member  | s in alphabetical order  |   |
| In the case of a<br>member that is a<br>corporation or a  | I  | Details of new members must be notified on form LLP288a |
| Scottish firm, the name is the  | Surname or Corporate Name                                      | CLIFF   |
| corporate or firm<br>name.  | Forename(s)  | STEPHON   |
| Tick this box if  | Address  | HOME FARM   |
| is a service address<br>for the beneficiary   |  | CHAPER HOUSE LANE                                       |
| of a Confidentiality<br>Order granted under<br>section 723B of the  | Post town  | PUDDING TON   |
| Companies Act 1985<br>otherwise, give your<br>usual residential   | County / Region  | WIRRAL Postcode CH6455W                                 |
| address. In the case of a corpora-<br>tion or Scottish firm, give the registered<br>or principal office<br>address. | Country  | Tick box if designated member                           |
|   | Member Reference   | Day Month Year  |
| Mahadas   | Number *(as advised by Companies House)                        | Date of Birth 1,41,11,19,6,9                            |
| Voluntary<br>Information  | . <u>इ</u> म   |   |

| In the case of a<br>member that is a   |  |  |
|--|--|--|
| corporation or a   | Surname or   | Details of new members must be notified on form LLP288a  |
| Scottish firm, the name is the   | Corporate Name   | HUGHES   |
| corporate or firm<br>name.   | Forename(s)  | JOHN   |
| Tick this box if   | Address #  | 2 BAMFORD PORD   |
| is a service address<br>for the beneficiary<br>of a Confidentiality  |  | DIDSBURY   |
| Order granted under section 723B of the  | Post town  | MANCHESTER   |
| Companies Act<br>1985 otherwise, give<br>your usual residen-   | County / Region  | Postcode M20 2GW   |
| tial address. In the<br>case of a corpora-<br>tion or Scottish   | Country  | EVGLANO. Tick box if designated member   |
| firm, give the regis-<br>tered or principal<br>office address.   |  |  |
|  | Member Reference   | Day Month Year   |
|  | Number *(as advised by Companies House)  | Date of Birth 07 02 / 1975   |
| * Voluntary information  | , companie : 1000,   |  |
|  | s in alphabetical order  |  |
|  | •  |  |
| In the case of a<br>member that is a<br>corporation or a   | •  | Details of new members must be notified on form LLP288a  |
|  | •  |  |
| member that is a<br>corporation or a<br>Scottish firm, the   | Surname or   | Details of new members must be notified on form LLP288a  IHIGEINS  AD AM   |
| member that is a corporation or a Scottish firm, the name is the corporate or firm name.   | Surname or Corporate Name  | 1-1561~5   |
| 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  | Surname or Corporate Name Forename(s)  | HIGGINS<br>ADAM  |
| 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  | Surname or Corporate Name Forename(s)  | 14 STANLEY ROAD  |
| 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   | Surname or Corporate Name Forename(s)  Address ***   | 14 STANLEY ROAD  |
| 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 corpora-  | Surname or Corporate Name Forename(s)  Address #  Post town  | HIGGINS ADAM  14 STANLEY ROAD  KNUTSFORD  UK WALL TO SE  |
| 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   | Surname or Corporate Name Forename(s)  Address ***  Post town  County / Region   | HIGGINS ADAM  14 STANLEY ROAD  KNUTSFORD  Postcode WA 16 DDS   |
| 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 | Surname or Corporate Name Forename(s)  Address **   Post town  County / Region  Country  | HIGGINS ADAM  14 STANLEY ROAD  KNUTSFORD  Postcode WA 16 DDS   |
| 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 | Surname or Corporate Name Forename(s)  Address **   Post town  County / Region  Country  Member Reference Number *(as advised) | HIGGINS  ADAM  14 STANLEY RAD  KNUTSFORD  Postcode WA 16 DDS  ENGARD  Tick box if designated member                  |
| 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 | Surname or Corporate Name Forename(s)  Address **   Post town  County / Region  Country  Member Reference                      | HIGGINS  ADAM  14 STANLEY ROAD  KNUTSFORD  Postcode WA 16 DDS  ENGANO  Tick box if designated member  Day Month Year |

| Members  | ·   |   |
|--|---|---|
| Please list member   | ers in alphabetical order                 |   |
| In the case of a<br>member that is a<br>corporation or a   |   | Details of new members must be notified on form LLP288a |
| Scottish firm, the name is the   | Surname or<br>Corporate Name              | HONDASON  |
| corporate or firm<br>name.   | Forename(s)                               | ALEXANIDA.  |
| Tick this box if the address shown   | Address **                                | 29 BOWLA (BA)   |
| is a service address<br>for the beneficlary<br>of a Confidentiality                                      |   | HALE  |
| Order granted under<br>section 723B of the   | Post town                                 | ATTENCHAM   |
| Companies Act<br>1985 otherwise, give<br>your usual residen-   | County / Region                           | Postcode WAIF9DR  |
| tial address. In the<br>case of a corpora-   | Country                                   | ENGLAND Tick box if designated member                   |
| tion or Scottish<br>firm, give the regis-<br>tered or principal<br>office address.                       | į.  |   |
| office address.  |   |   |
|  | Member Reference                          | Day Month Year  |
| •  | Number *(as advised   by Companies House) | Date of Birth / 5 0 8 1 9 70                            |
| * Voluntary information  |   |   |
| Members Please list member In the case of a member that is a corporation or a                            |   | Details of new members must be notified on form LLP288a |
| Scottish firm, the name is the   | Surname or<br>Corporate Name              | k NOTT  |
| corporate or firm<br>name.   | Forename(s)                               | KENNETIH  |
| ** Tick this box if  | Address **                                | IVY HOUSE   |
| the address shown is a service address for the beneficiary   |   | Gassop Ban  |
| of a Confidentiality Order granted under section 723B of the   | Post town                                 | MARPLE BRIDEE   |
| Companies Act 1985<br>otherwise, give your<br>usual residential  | County / Region                           | STOCKPORT Postcode SK6 SRX                              |
| address. In the case of a corporation or Scottish firm, give the registered or principal office address. | Country                                   | · Tick box if designated member                         |
|  | Member Reference                          | Day Month Year  |
|  | Number *(as advised by Companies House)   | Date of Birth 05013191519                               |
| * Voluntary information  | [15]<br>11] 기                             |   |

| · Flease list membe   |  |   |
|---|--|---|
| In the case of a<br>member that is a<br>corporation or a  |  | Details of new members must be notified on form LLP288a                         |
| Scottish firm, the name is the  | Surname or<br>Corporate Name                                   | MOOR HOUSE  |
| corporate or firm<br>name.  | Forename(s)  | JULIE CLARS   |
| <sup>††</sup> Tick this box if  | Address **   | 88 LONGFORD ROAD  |
| is a service address for the beneficiary  |  | CHORLTON  |
| of a Confidentiality Order granted under section 723B of the  | Post town  | MANCHESIM   |
| Companies Act<br>1985 otherwise, give   | County / Region  | Postcode M21 9Nf.   |
| your usual residen-<br>tial address. In the<br>case of a corpora-   | Country  | Tick box if designated member   |
| tion or Scottish<br>firm, give the regis-   | ,  | ENGERO D  |
| tered or principal office address.  |  |   |
|   | Member Reference   | Day Month Year  |
|   | Number *(as advised by Companies House)                        | Date of Birth 1,2 1,1 1,9 7,5   |
| * Voluntary information   | zy zempamee meace,   |   |
|   |  |   |
|   |  |   |
| Members Please list members   | s in alphabetical order  | 7.  |
| In the case of a<br>member that is a  |  | Details of new members must be notified on form LLP288a                         |
| corporation or a<br>Scottish firm, the<br>name is the   | Surname or<br>Corporate Name                                   | LANC.   |
| corporate or firm<br>name.  | Forename(s)  | LESIIS  |
| Tick this box if  | Address #  | 33 HUNTS FIELD CLOSE  |
| the address shown is a service address  | į.   |   |
| for the beneficiary   | <b></b>  |   |
| of a Confidentiality  | Post town  | LYMM  |
| -   | Post town  | LYMM  |
| of a Confidentiality Order granted under section 7238 of the Companies Act 1985 otherwise, give your usual residential  | County / Region  | L7MM  Postcode WA 3 OSS   |
| of a Confidentiality<br>Order granted under<br>section 7238 of the<br>Companies Act 1985<br>otherwise, give your  | ر<br>آ   | LYMM  |
| of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corpora-   | County / Region  | L7MM  Postcode WA 3 OSS   |
| of a Confidentiality Order granted under section 7238 of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corpora- tion or Scottish firm, give the registered or principal office          | County / Region Country  | L7MM  Postcode WA 3 OSS  ENGAVIS  Tick box if designated member  Day Month Year |
| of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corpora- tion or Scottish firm, give the registered or principal office address. | County / Region Country  | L7MM  Postcode WA B OSS  ENGAVIS  Tick box if designated member                 |
| of a Confidentiality Order granted under section 7238 of the Companies Act 1985 otherwise, give your usual residential address. In the case of a corpora- tion or Scottish firm, give the registered or principal office          | County / Region  Country  Member Reference Number *(as advised | Postcode WA 3 OSS  Fick box if designated member  Day Month Year                |