

000571/30

LLP363

Annual Return of a Limited Liability Partnership



Please complete in typescript,
or in bold black capitals.

CHWP000

LLP Number

OC323563

Full Name of Limited Liability Partnership

NATURAL RETREATS PENSION LLP

Date of this return

The information in this return is made up to

Day Month Year
3 1 0 3 2 0 0 8

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

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

Show here the address as at the date of this return.

26TH FLOOR, CITY TOWER

PICCADILLY PLAZA

Post town

MANCHESTER

County

UK Postcode

M1 4BD

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

Designated Member

Date

2/6/09

When you have signed the return send it with the fee to the Registrar of Companies.

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

for partnerships registered in England and Wales

or

Companies House, 139 Fountainbridge Edinburgh, EH3 9FF

DX 235 Edinburgh

for partnerships registered in Scotland

or LP - 4 Edinburgh 2



FRIDAY

16/03

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

ABRAMS

Forename(s)

GARRY

Address **

C/O AJ BELL SIPP

TRAFFORD HOUSE, CHESTER ROAD

Post town

MANCHESTER

County / Region

UK

Postcode

M32 0RS

Country

Tick box if designated member

☒

Member Reference Number *(as advised by Companies House)

Day Month Year
0 2 0 7 1 9 5 1

* 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.

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☐

Details of new members must be notified on form LLP288a

Surname or Corporate Name

FINLAY

Forename(s)

SAMUEL LYLE

Address **

C/O AJ BELL SIPP

TRAFFORD HOUSE, CHESTER ROAD

Post town

MANCHESTER

County / Region

UK

Postcode

M32 0RS

Country

Tick box if designated member

☒

Member Reference Number *(as advised by Companies House)

Day Month Year
2 8 0 6 1 9 6 2

* Voluntary information

Members

Please list members in alphabetical order

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☐

Details of new members must be notified on form LLP288a

Surname or Corporate Name

HEATON

Forename(s)

ANTHONY

Address ††

c/o AXA SUNTRUST STS DEPT

PO BOX 64

Post town

BRISTOL

County / Region

UK

Postcode

BS99 3EG

Country

Tick box if designated member

☒

Member Reference Number *(as advised by Companies House)

Date of Birth

Day Month Year

2	1	0	5	1	9	6	7
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* Voluntary information

Members

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☐

Details of new members must be notified on form LLP288a

Surname or Corporate Name

PLATT

Forename(s)

DAVID ANDREW

Address ††

c/o AJ BELL (PP) TRUSTEES LTD

THE DOCK OFFICE, TRAFFORD ROAD, SALFORD QUAYS

Post town

MANCHESTER

County / Region

UK

Postcode

M5 2XB

Country

Tick box if designated member

☒

Member Reference Number *(as advised by Companies House)

Date of Birth

Day Month Year

1	0	0	6	1	9	6	6
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* Voluntary information

Members

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☐

Details of new members must be notified on form LLP288a

Surname or Corporate Name

SPENCE

Forename(s)

MATTHEW DAWSON

Address ††

DACRE BANK, 4 VALE ROAD

BOWDON

Post town

ALTRINCHAM

County / Region

UK

Postcode

WA14 3AB

Country

Tick box if designated member

☒

Member Reference Number * (as advised by Companies House)

Date of Birth

Day Month Year

1 1 9 0 9 1 1 9 6 9

* 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.

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☐

Details of new members must be notified on form LLP288a

Surname or Corporate Name

WILD

Forename(s)

ANTHONY DAVID

Address ††

80A TEMPLE ROAD

SMITHILLS

Post town

BOLTON

County / Region

UK

Postcode

BL7 3LT

Country

Tick box if designated member

☒

Member Reference Number * (as advised by Companies House)

Date of Birth

Day Month Year

2 6 0 9 1 1 9 7 4

* Voluntary information