

Companies House

for the record — Please complete in typescript,

or in bold black capitals

	P	3	-	3

Annual Return of a Limited Liability Partnership

CHIMPOOD			·
CHWP000	LLP Number	OC324375	
Full Name of Limited		J & S BROOKSBANK LLP	
	Liability Partnership		
Date of this return		Day Month Year	
	The information in this return is made up to	10 1 1 1 1 1 1 1 1 1	
15	Date of next return	Day Month Year	
re	ou wish to make your next turn on a date earlier than		
	anniversary of this return lease show the date here		
Any change of registered office show here the address as at the date of this return		CLIFTON HOUSE, CLIFTON MILLS	
		BAILIFF BRIDGE	
Form LLP287	Post town	BRIGHOUSE	
	County	WEST YORKSHIRE	UK HD6 4JJ
			Postcode HD0 433
	Register of Debenture Holders		
If there is a regist			
debenture holders, duplicate of any	or a		
register or part which is not kept a	if the County		UK
registered office, here where it is kep	-		Postcode
	List members	On page 2 As a designated member I certify that t	the information given in this return is
	Certificate	true to the best of my knowledge and b	
Signed			Date 06/12/07
		Designated Member	
•	signed the return send if a Registrar of Companies	I bio roturo includos ! ()NIL	continuation sheets
Chagina aha I	d ha mada aa ahla to		per)
		When you have completed and signed Registrar of Companies at	the form please send it to the
		Companies House, Crown Way, Cardiff for partnerships registered in England and	
	HNMDVDL* 10/12/2007 25	Companies House, 37 Castle Terrace, I for partnerships registered in Scotland	
COMI	PANIES HOUSE	To partife stups registered in Socialid	or Er - 4 Edilburgh

Members				
	in alphabetical order			
In the case of a member that is a corporation or a				
Scottish firm, the name is the	Surname or Corporate Name			
corporate or firm name	Forename(s)	JOHN STEPHEN		
Tick this box if the address shown	Address **	FIELD BOTTOM FARM		
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		COLEY ROAD, SHELF		
	Post town	HALIFAX		
	County / Region	WEST YORKSHIRE UK Postcode	HX3 7SA	
	Country	ENGLAND Tick box if de	signated member	
firm, give the regis- tered or principal office address				
	Member Reference	Da	y Month Year	
	Number *(as advised by Companies House)	Date of Birth 0	3 0 4 1 9 5 6	
* Voluntary information				
Members Please list members	ın alphabetical order			
In the case of a member that is a corporation or a		Details of new members must be notified on form LLP288a BROOKSBANK		
Scottish firm, the name is the	Surname or Corporate Name			
corporate or firm name	Forename(s)	SUSAN		
** Tick this box if	Address **	FIELD BOTTOM FARM		
the address shown is a service address	·	COLEY ROAD, SHELF		

member that is a corporation or a		Details of new members n	nust be notified on form LLP288a
Scottish firm, the name is the	Surname or Corporate Name	BROOKSBANK	
corporate or firm name	Forename(s)	SUSAN	
^{††} Tick this box if	Address #	FIELD BOTTOM FARM	
the address shown is a service address for the beneficiary		COLEY ROAD, SHELF	
of a Confidentiality Order granted under section 723B of the	Post town	HALIFAX	
Companies Act 1985 otherwise, give your	County / Region	WEST YORKSHIRE	UK Postcode HX3 7SA
usual residential address In the case of a corpora-	Country	ENGLAND	Tick box if designated member
tion or Scottish firm, give the registered or principal office address			
	Member Reference Number *(as advised by Companies House)		Day Month Year Date of Birth 1 3 0 8 1 9 5 9