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Please complete in typescript, or in bold black capitals.

CHWP000

# LLP363

## Annual Return of a Limited Liability Partnership

LLP Number

Full Name of Limited Liability Partnership

**Date of this return**

The information in this return is made up to

Day	Month	Year
17	05	2009

**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
17	05	2010

**Registered Office**

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

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

10 Brook Street  
5th Floor  
London  
County   
UK Postcode

**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

n/a  
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

11/06/09

When you have signed the return send it

This return includes  continuation sheets.  
(enter number)

FRIDAY



A18 12/06/2009 212  
COMPANIES HOUSE

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  
partnerships registered in England and Wales or  
Companies House, 139 Fountainbridge Edinburgh, EH3 9FF DX 235 Edinburgh  
partnerships registered in Scotland or LP - 4 Edinburgh 2

## 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.

☐

Surname or Corporate Name

Forename(s)

Address ††

Post town  
County / Region

Country

Details of new members must be notified on form LLP288a

York Capital Management UK Advisors Limited

10 Brook Street

5th Floor

London

UK

Postcode W1S 1BG

United Kingdom

Tick box if designated member

☒

Member Reference Number \*(as advised by Companies House)

Date of Birth

Day Month Year

2 0 0 6 2 0 0 0

\* 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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☐

Surname or Corporate Name

Forename(s)

Address ††

Post town  
County / Region

Country

Details of new members must be notified on form LLP288a

Aurand

Christophe

3-8 Portchester Gate

Apartment 74

London

UK

Postcode W2 3HW

United Kingdom

Tick box if designated member

☐

Member Reference Number \*(as advised by Companies House)

Date of Birth

Day Month Year

\* Voluntary information

Please complete in typescript,  
or in bold black capitals.

CHWP000

# LLP363 cont

## Annual Return (continuation sheet)

LLP Number

### 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.

☐ <sup>††</sup> 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	<input type="text" value="Reyntjens"/>		
Forename(s)	<input type="text" value="Christian"/>		
Address <sup>††</sup>	<input type="text" value="9 Bina Gardens"/>		
	<input type="text" value="Flat 3"/>		
Post town	<input type="text" value="London"/>		
County / Region	<input type="text"/>	UK Postcode	<input type="text" value="SW5 0LD"/>
Country	<input type="text" value="United Kingdom"/>	Tick box if designated member	<input type="checkbox"/>

Member Reference Number \*(as advised by Companies House)

Date of Birth

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

\* 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	<input type="text"/>		
Forename(s)	<input type="text"/>		
Address <sup>††</sup>	<input type="text"/>		
	<input type="text"/>		
Post town	<input type="text"/>		
County / Region	<input type="text"/>	UK Postcode	<input type="text"/>
Country	<input type="text"/>	Tick box if designated member	<input type="checkbox"/>

Member Reference Number \*(as advised by Companies House)

Date of Birth

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

\* Voluntary information

04/02