



Companies House

# LLAR01 (ef)

## Annual Return



X5AI07X1

Received for filing in Electronic Format on the: 04/07/2016

LLP name in full: 55 PLUS WATERSIDE LLP

LLP Number: OC373818

Date of this return: 27/03/2016

Company Type: Limited Liability Partnership

Situation of Registered Office:  
NUMBER ONE WATERTON PARK  
BRIDGEND  
MID GLAMORGAN  
CF31 3BF

*LLP Member*                    ***I***  
*Type:*                            **Person**  
*Full forename(s):*            **MR PAUL**

*Surname:*                      **CLARKE**

*Former names:*

*Service Address:*            **6 ALDERBROOK CYNCOED  
CARDIFF  
UNITED KINGDOM  
CF23 6QD**

**Appointment is for a Designated Member**

*Country/State Usually Resident:*   **UNITED KINGDOM**

*Date of Birth:*   **\*\*/06/1978**

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*LLP Member*                      **2**  
*Type:*                                **Person**  
*Full forename(s):*                **MR MARC RENE**

*Surname:*                         **JEHU**

*Former names:*

*Service Address:*                **NUMBER ONE WATERTON PARK  
BRIDGEND  
MID GLAMORGAN  
UNITED KINGDOM  
CF31 3BF**

**Appointment is for a Designated Member**

*Country/State Usually Resident:*   **WALES**

*Date of Birth:*   **\*\*/05/1967**

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*LLP Member*                    **3**  
*Type:*                            **Person**  
*Full forename(s):*            **MR SIMON PAUL**

*Surname:*                      **JEHU**

*Former names:*

*Service Address:*            **NUMBER ONE WATERTON PARK  
BRIDGEND  
MID GLAMORGAN  
UNITED KINGDOM  
CF31 3BF**

**Appointment is for a Designated Member**

*Country/State Usually Resident:*   **WALES**

*Date of Birth:*   **\*\*/01/1970**

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*LLP Member*                      **4**  
*Type:*                              **Person**  
*Full forename(s):*              **LLOYD ROBERT**

*Surname:*                        **PARSONS**

*Former names:*

*Service Address:*              **23 DAN Y HEOL  
CARDIFF  
UNITED KINGDOM  
CF23 6JU**

**Appointment is for a Designated Member**

*Country/State Usually Resident:*   **UNITED KINGDOM**

*Date of Birth:*   **\*\*/10/1980**

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*LLP Member*                    **5**  
*Type:*                            **Person**  
*Full forename(s):*            **MRS GILLIAN**

*Surname:*                      **WILLIAMS**

*Former names:*

*Service Address:*            **131 LAKE ROAD WEST ROATH PARK**  
                                 **CARDIFF**  
                                 **UNITED KINGDOM**  
                                 **CF23 5PJ**

**Appointment is for a Designated Member**

*Country/State Usually Resident:*   **UNITED KINGDOM**

*Date of Birth:*   **\*\*/11/1953**

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*LLP Member*                      **6**  
*Type:*                              **Person**  
*Full forename(s):*              **MR STEPHEN GALE**

*Surname:*                        **WILLIAMS**

*Former names:*

*Service Address:*              **131 LAKE ROAD WEST ROATH PARK  
CARDIFF  
UNITED KINGDOM  
CF23 5PJ**

**Appointment is for a Designated Member**

*Country/State Usually Resident:*   **WALES**

*Date of Birth:*   **\*\*/07/1949**

## *Authorisation*

*Authenticated*

*This form was authorised by one of the following:*

**Designated member, Judicial factor.**