

Please complete in typescript, or in bold black capitals

CHWP000

LLP'Number

50-300737:

COMPANIES HOUSE

Full Name of Limited Liability Partnership PLUSCARDEN INVESTMENTS

Date of this return

The information in this return is made up to Day Month , Year

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

Dav Month Year 10 2 0 0 7

Registered Office Any change of

registered office must be notified on Form LLP287

Show here the address

as at the date of this return.

Post town

PARK TOWN

County

Postcode!

P363

Annual Return of a Limited

Liability Partnership

Register of **Debenture Holders**

If there is a register of debenture holders, or a duplicate of any such register or part of it, " e 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

12 OCTOBER 2006

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



Companies House

This return includes

for partnerships registered in Scotland

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 Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh

or LP 4 Edinburgh 2

10/03

Please list members in alphabetical order		
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 corporate or firm name	Surname or Corporate Name	LAFAYEEUNEY
	Forename(s)	DANIEL
¹¹ Tick this box if the address shown	Address ††	4: FARK: TOWN
Is a service address for the beneficiary, of a Confidentiality Order granted under section 723B of the Companies Act 1985 otherwise, give your usual residen	- Tal 250 (55)	1. Turn 2. M
	Post town	opford.
	County / Region	OxFOLDSHIRE DX2 65H
tlal address. In the case of a corpora tion or Scottish	Country	ا الله عند الله Tick box if designated member
firm, give the regis tered or principal office address		
onice address		
	Member Reference	Day Month Year
	Number *(as advised	Oate of Birth
* Voluntary	by Companies Housé)	
information		
And the state of t		
Merabers. A Property of the second of the se		
In the case of a member that is a corporation or a Scottish firm, the name is the		Details of new members must be notified on form LLP288a
	Surname or Corporate Name	macibol
corporate or firm name	Forename(s)	FIONA KATHERINE ADELAIDE
** Tick this box if	Address †† [4 PARK TOWN .
the address shown is a service address for the beneficiary of a Confidentiality Order granted under section 728 of the Companies Act 1985 otherwise, give your usual residential '		
	Post town	OPFORD
	County / Region	Postcode DXL 65H
address in the case of a corpora tion or Scottish firm, give the registered or principal office address	Country	Tick box if designated member
	Mombas Defere	Day Month Year
	Member Reference Number *(as advised	Date of Birth
	by Companies House)	Suite of Birth

Members

* Voluntary information