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Companies He	DUSC	PEE PAID
Please complete in type or in bold black capitals	• •	Annual Return of a Limited Liability Partnership
CHWP000		Liability i ai tile i sinp
	LLP Number	OC 302698
Full Name of Limited Liability Partnership		PORTURY DESIGN LLP
Date of this return The information in this return is made up to		Day Month Year 2   S 0   7 2 0 0 4
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
Any change of Show	istered Office here the address as at the date of	43 ALBANY ROAD
must be notified on Form LLP287.	this return.	
	Post town	SALISBURY
	County	SALIS BURY  WILTSHIRE POSTCODE SP1349
Register of Debenture Holders		
If there is a register of		
debenture holders, or a duplicate of any such register or part of it,	Post town	
which is not kept at the registered office, state	County	UK Postcode
here where it is kept L	ist members c	on page 2
		As a designated member I certify that the information given in this return is true to the best of my knowledge and belief.
	Signed	Date 18/8/04
		Designated Member
When you have signed the return send it with the fee of £35 to the Registrar of Companies. Cheques should be made payable to 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 for partnerships registered in England and Wales DX 33050 Cardiff

for partnerships registered in Engiana or
Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB
for partnerships registered in Scotland

DX 235 Edinburgh
or LP - 4 Edinburgh 2
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Members Please list members	in alphabetical order	
In the case of a member that is a		Details of new members must be notified on form LLP288a
corporation or a Scottish firm, the name is the corporate or firm name.	Surname or Corporate Name	FOSTER
	Forename(s)	JOM GERNO
†† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality	Address #	43 ALBANY ROAD
Order granted under section 723B of the Companies Act	Post town	SALIS BURY
1985 otherwise, give your usual residen- tial address. In the	County / Region	WICKSHIRE POSTCODE SPIBY
case of a corpora- tion or Scottish firm, give the regis- tered or principal	Country	UNITED KUNGDOM Tick box if designated member
* Voluntary information  Members	Number *(as advised by Companies House)	9745 Date of Birth 2394195
Please list members In the case of a member that is a corporation or a Scottish firm, the name is the	ın aıpnabeticai order	Details of new members must be notified on form LLP288a
	Surname or Corporate Name	FOSTER
corporate or firm name.	Forename(s)	Meion Erizabeth
†† 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 corpora- tion or Scottish firm, give the registered or principal office address.	Address **	43 ALBANY ROAS
	Post town	SALISBURY  WILTSKIRE POSTCODE SPIBY
	County / Region	The state of the
	Country	UNITED KWGDOW Tick box if designated member
	Member Reference	Day Month Year
	Number *(as advised by Companies House)	9746 Date of Birth 2,41,01,954

\* Voluntary information