

Please complete in typescript, or in bold bla

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LLP363

Annual Return of a Limited

or in bold black capitals. CHWP000		COMPANIES Liability Partnership
	LLP Number	0 C 30 2 698
Full Name of Limited Liability Partnership		PORTWAY 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 S
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 registered office as at the date of this return. Registered Office show here the address as at the date of this return.		43 ACSMY ROAD
7 0/1/1/22/2011	Post town	SALISBURY
County		WICTSHIRE Postcode SP1379
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	Post town County	_ UK
		Postcode
	List members o	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
When you have signed the return send it with the fee to the Registrar of Companies.		This return includes continuation sheets.



Cheques should be made payable to

COMPANIES HOUSE

13/07/05

(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 for partnerships registered in England and Wales

DX 33050 Cardiff

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

DX 235 Edinburgh or LP - 4 Edinburgh 2

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.		Details of new members must be notified on form LLP288a
	Surname or Corporate Name	FOSTER
	Forename(s)	JOHN GERLES
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	Address #	43 KBANY ROAD
	, Post town	SALISBURY
	County / Region	WICTSHEE Postcode SP1379
	Country	UNITED KWGDOW Tick box if designated member
firm, give the regis- tered or principal office address.		•
	Member Reference Number *(as advised	Day Month Year Pare of Birth 2,3 0,4 L956
* Voluntary information	by Companies House)	
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.		Details of new members must be notified on form LLP288a
	Surname or Corporate Name	FOSTER
	Forename(s)	MARION ELIZABETH
th 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	Address **	43 trany Rose
	Post town	SKUSBURY
	County / Region	WILTSHUE Postcode SP1 379
	Country	UNITED KINGDOW Tick box if designated member
or principal office address.		
		Day Month Year
	Member Reference	
	Number *(as advised by Companies House)	9 146 Date of Birth 24 10 (1954

* Voluntary information