

LLAR01 (ef)

Annual Return



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Received for filing in Electronic Format on the:

19/05/2011

LLP name in full:

SUNDIAL HOUSE CLINIC LLP

LLP Number:

OC307695

Date of this return:

19/04/2011

Company Type:

Limited Liability Partnership

Situation of Registered

Office:

SUNDIAL HOUSE

111 QUEENS ROAD

BRIGHTON

EAST SUSSEX

BN1 3XF

| LLP Member Type: Full forename(s): | <pre>Person MR MATTHEW IVAN</pre> | | |
|--|---|--|--|
| Surname: | BENNETT | | |
| Former names: | | | |
| Service Address: | SEXTONS BARN JOLESFIELD, PARTRIDGE GREEN HORSHAM RH13 8JT | | |
| Appointment is for a Designated Member | | | |
| Country/State Usually Resident: UNITED KINGDOM | | | |
| Date of Birth: 07/02/1964 | | | |

| LLP Member | 2 |
|------------------------------|---------------------------------------|
| Type: | Person |
| Full forename(s): | POLLY |
| Surname: | BENNETT |
| Former names: | |
| Service Address: | SEXTONS BARN PARTRIDGE GREEN RH13 8JT |
| | |
| | |
| Appointment is for a Designa | ted Member |
| Country/State Usually Re | sident: UNITED KINGDOM |
| Date of Birth: 09/05/1959 | |
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| | |

| LLP Member | 3 |
|-----------------------------|---|
| Type: | Person |
| Full forename(s): | BEN |
| Surname: | CLARK |
| Former names: | |
| Service Address: | 55 OATHALL ROAD HAYWARDS HEATH RH16 3EL |
| Appointment is for a Member | - |
| Country/State Usually Res | sident: UNITED KINGDOM |
| Date of Birth: 18/03/1974 | |
| | |

LLP Member 4

Type: Person

Full forename(s): AMANDA JANE ASTON

Surname: GORING

Former names:

Service Address recorded as Company's registered office

Appointment is for a Member

Country/State Usually Resident: UNITED KINGDOM

Date of Birth: 05/05/1979

LLP Member 5

Type: Corporate

Name: CHIROPRACTIC CONSULTING LIMITED

Registered or

principal address: 48 HIGHDOWN ROAD

HOVE

EAST SUSSEX

UNITED KINGDOM

BN3 6ED

European Economic Area (EEA) LLP

Register Location: ENGLAND & WALES

Registration Number: 05058867

Appointment is for a Designated Member

Consented to Act: Y Date authorised: Authenticated:

| | Authorisation | |
|---|---------------|--|
| Authenticated | | |
| This form was authorised by one of the follow | ving: | |
| Designated member, Judicial factor. | | |
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