

Pleas e complete in typescript, or in bold black capitals.

10/03

LLP363

**Annual Return of a Limited** Liability Partnership

CHWP000		
	LLP Number	06311146
	Name of Limited bility Partnership	PCP Capital Partners LLP
	Pate of this return information in this return is made up to	Day Month Year  2 4 0 1 2 0 0 7
If you w retum the ann	ate of next return vish to make your next on a date earlier than niversary of this return e show the date here.	Day Month Year
	Regist ered Office now here the address as at the date of this return. Post town	31 Hill Sweet,
·	County	LONDON DOSTCODE NIT SLS
De	Regist er of benture 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	Postcode Postcode
	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 01/02/2007
with the fee to the Re Che ques should be	e made pavable to	(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 Card
A19 02	//UQMQL* 2/02/2007 158 NIES HOUSE	for partnerships registered in England and Wales  Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB  DX 235 Edinburgh, EH1 2EB  or LP - 4 Edinburgh

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	EADIE
	Forename(s)	CRAIG FARQUHAR.
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	Address ==	2 HOME FARM CLOSE,
		ABBOTS RIPTON,
	. Post town	HUNTING DON.
1985 otherwise, give your usual residen-	County / Region	Postcode Pt28 2PT
tial address. In the case of a corpora- tion or Scottish	Country	U·K Tick box if designated member
firm, give the regis- tered or principal office address.		
		Day Marth Von
	Member Reference Number *(as advised	27180 Date of Birth 2,20,4 1,9,5,5
* Voluntary	by Companies House)	
infor mation		
•		
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	Surname or Corporate Name	STAVELEY
corporate or firm name.	Forename(s)	AMANDA LOUISt
= Tick this box if	Address ==	FLAT 125,
the address shown is a service address for the beneficiary		56 CURZON STREET
of a Confidentiality Order granted under section 723B of the	Post town	
Companies Act 1985 otherwise, give your usual residential	County / Region	LONDON ON Postcode NTT 8PB
address, in the case of a corpora-	Country	Tick box if designated member
tion or Scottish firm, give the registered or principal office address.		
	Member Reference	Day Month Year
•	Number *(as advised by Companies House)	44381 Date of Birth 111 014 1191713
* Voluntary information		