

**Annual Return of a Limited** Please complete in typescript, or in bold black capitals. **Liability Partnership CHWP000 LLP Number** 00337005 J. T. DESIGN PARTHERSHIP LLP. **Full Name of Limited Liability Partnership** Day Month Year Date of this return The information in this return 0.0 is made up ਿੱ Date of next return Day Month Year If you wish to make your next return on a date earlier than the anniversary of this return please show the date here. Registered Office 8 OAKWOOD CLOSE Any change of Show here the address registered office as at the date of must be notified on SHENSTONE this return. Form LLP287. Post town UATFIELD County STAFFORDSHIRE WSI4 OJ J Postcode Register of **Debenture Holders** If there is a register of debenture holders, or a duplicate of any such Post town register or part of it, which is not kept at the UK: County registered office, state Postcode here where it is kept 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 Date 27/05/09 **Designated Member** nd it This return includes continuation sheets. 0 iies. : to (enter number) TUESDAY When you have completed and signed the form please send it to the Registrar of Companies at: 02/06/2009 A45 Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff **COMPANIES HOUSE** for partnerships registered in England and Wales Companies House, 139 Fountainbridge Edinburgh, EH3 9FF \*AGJF6A8C\* DX 235 Edinburgh 156 for partnerships registered in Scotland 28/05/2009 or LP - 4 Edinburgh 2 A11 COMPANIES HOUSE

Members Please ist members	s 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.  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 residen- tial address. In the case of a corpora- tion or Scottish	Surname or Corporate Name	DEFFUEY
	Forename(s)	GARY WILLIAM
	Address <sup>††</sup>	20 COURT DRIVE
		SHENSTONE
	Post town	LICHFIEUD
	County / Region	STAFFORDSHIRE DIK WS14 OJG.
	Country	ENGLAND Tick box if designated member
firm, give the regis- tered or principal office address.		
		Dave Manth - Vanc
	Member Reference Number *(as advised	Day Month Year  Date of Birth 3,00,31,9,5,3
* Voluntary	by Companies House)	
information		
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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	DEFFLEY
	Forename(s)	TRACY HEVEN.
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-	Address **	20 COURT DRIVE
		SHENSTONE
	Post town	UCHFIEW
	County / Region	STAFFORDSHIRE UK Postcode WS14 0JG.
	Country	Tick box if designated member
tion or Scottish firm, give the registered or principal office address.		
	Member Reference Number *(as advised	Day Month Year  Date of Birth 0,60,31,9,6,8
* Voluntary	by Companies House)	Date of Birth 0,60,31,9,6,8
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