



Please complete in typescript, or in bold black capitals.

CHFP029

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NATIS

058026

Annual Return

Company Number 481406

Company Name in full John Lewis Partnership Trust Limited

Date of this return

The information in this return is made up to

Day Month Year

1 9 / 10 17 / 12 10 11

Date of next return

If you wish to make your next return to a date earlier than the anniversary of this return please show the date here. Companies House will then send a form at the appropriate time.

Day Month Year

1 9 / 10 17 / 12 10 12

Registered Office

Show here the address at the date of this return.

171 VICTORIA STREET

Any change of registered office must be notified on form 287.

Post town

LONDON

County / Region

UK Postcode

S W 1 E S N N

Principal business activities

Show trade classification code number(s) for the principal activity or activities.

7415

If the code number cannot be determined, give a brief description of principal activity.

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 Cardiff
for companies registered in England and Wales
or
Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB
for companies registered in Scotland
DX 235 Edinburgh



Register of members

If the register of members is not kept at the registered office, state here where it is kept.

Post town

County / Region

UK Postcode

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 / Region

UK Postcode

Company type

Public limited company

Private company limited by shares

Private company limited by guarantee without share capital

Private company limited by shares exempt under section 30

Private company limited by guarantee exempt under section 30

Private unlimited company with share capital

Private unlimited company without share capital

Please tick the appropriate box

Company Secretary

(Please photocopy this area to provide details of joint secretaries).

* Voluntary details.

If a partnership give the names and addresses of the partners or the name of the partnership and office address.

Usual residential address must be given. In the case of a corporation, or a Scottish firm, give the registered or principal office address.

Details of a new company secretary must be notified on form 288a.

Name

* Style / Title

MR

Forename(s)

TERENCE FRANK

Surname(s)

NEVILLE

Address

'ELMSWOOD'

ELMSCOTT GARDENS

Post town

LONDON

County / Region

UK Postcode

N 2 1 1 2 B 1 P

Country

ENGLAND

Directors

Details of new directors must be notified on form 288a

Please list directors in alphabetical order.

Name * Style / Title MISS

Day Month Year
Date of birth 07 / 08 / 1956

Forename(s) KATHRYN JILL

Surname GREEN

Address 5 MARRICK, WILNECOTE

Usual residential address must be given. In the case of a corporation or a Scottish firm, the name is the corporate or firm name.

Post town TAMWORTH

County / Region STAFFS **UK Postcode** B77 4NU

Country ENGLAND **Nationality** BRITISH

Business occupation REGISTRAR

* Voluntary details.

Name * Style / Title SIR

Day Month Year
Date of birth 07 / 01 / 1947

Forename(s) STUART

Surname HAMPSON

Address PANKRIDGE FARM, CHINNOR ROAD

Usual residential address must be given. In the case of a corporation or a Scottish firm, the name is the corporate or firm name.

Post town HIGH WYCOMBE

County / Region BUCKINGHAMSHIRE **UK Postcode** HP14 4AE

Country **Nationality** BRITISH

Business occupation CHAIRMAN

Directors

Details of new directors must be notified on form 288a

Please list directors in alphabetical order.

Name * Style / Title MR

Date of birth Day Month Year
2 15 / 10 09 / 11 94 18

Forename(s) MICHAEL MARK

Surname MILNER

Address 29 GROSVENOR ROAD

Usual residential address must be given. In the case of a corporation or a Scottish firm, the name is the corporate or firm name.

Post town LONDON

County / Region _____ **UK Postcode** N B 1 1 E Y

Country _____ **Nationality** BRITISH/CANADIAN

Business occupation DIRECTOR OF FINANCIAL PLANNING

* Voluntary details.

Name * Style / Title MR

Date of birth Day Month Year
2 11 / 10 17 / 11 95 12

Forename(s) ANDREW

Surname SLATER

Address 12 MOORBANK ROAD, SANDYGATE

Usual residential address must be given. In the case of a corporation or a Scottish firm, the name is the corporate or firm name.

Post town SHEFFIELD

County / Region _____ **UK Postcode** S 1 1 0 1 5 T E

Country _____ **Nationality** BRITISH

Business occupation MANAGING DIRECTOR OF STORE

Directors

Details of new directors must be notified on form 288a

Please list directors in alphabetical order.

Name	* Style / Title	MR		
		Day	Month	Year
Date of birth		08	03	1942
Forename(s)		DAVID ERNEST		
Surname		YOUNG		
Address		61 SYDNEY STREET		
Usual residential address				
Post town		LONDON		
County / Region			UK Postcode	SW6PX
Country			Nationality	BRITISH
Business occupation		FINANCE DIRECTOR		

* Voluntary details.

Name	* Style / Title			
		Day	Month	Year
Date of birth				
Forename(s)				
Surname				
Address				
Usual residential address				
Post town				
County / Region			UK Postcode	
Country			Nationality	
Business occupation				

Issued share capital
Enter details of all the shares in issue at the date of this return.

Class <i>(e.g. Ordinary/Preference)</i>	Number of shares issued	Aggregate Nominal Value <i>(i.e. Number of shares issued multiplied by nominal value per share, or total amount of stock)</i>
A' SHARES	40	£ 40.00
B' SHARES	60	£ 60.00
£1 DEF ORD	250,000	£ 250,000.00
Totals	250,100	£ 250,100.00

List of past and present shareholders
(Use attached schedule where appropriate)

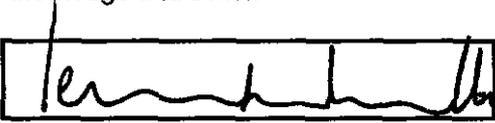
A full list is required if one was not included with either of the last two returns.

There were no changes in the period

	on paper	in another format
A list of changes is enclosed	<input type="checkbox"/>	<input type="checkbox"/>
A full list of shareholders is enclosed	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Certificate

I certify that the information given in this return is true to the best of my knowledge and belief.

Signed  Date

† Please delete as appropriate.

† a director/secretary

When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to **Companies House**.

This return includes continuation sheets.
(enter number)

Please give the name, address, telephone number, and if available, a DX number and Exchange, for the person Companies House should contact if there is any query.

THE SECRETARY, JOHN LEWIS PLC, 171 VICTORIA STREET, LONDON, SW1E 5NN

Tel

DX number DX exchange

