In accordance with section 854 of the Companies Act 2006 as applied by the Limited Liability Partnerships (Application of Companies Act 2006) Regulations 2009.

LL AR01

Annual Return of a Limited Liability Partnership (LLP)



A fee is payable with this form. Please see 'How to pay' on the last page.

What this form is for

You may use this form to confirm that the LLP information is correct as at the date of this return. You must file an Annual Return at least once every year. What this form is NOT for

You cannot use this form to give notice of changes to the LLP members, the registered office address or information relating to the company records.



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	once every year. the company records.	COMPANIES HOUSE	
Part 1	LLP details	→ Filling in this form Please complete in typescript or in bold black capitals. All fields are mandatory unless specified or indicated by *	
	This section must be completed by all LLPs.		
A1	LLP details		
LLP number	0 c 3 0 5 9 Z 9	If your LLP has changed its name,	
LLP name in full •	ALPINE EAGLE OXFORD LIMITED LIABILITY	please provide the LLP name as at the date of this return.	
	PARTNERSHIP		
A2.	Return dates	Your LLP's return date is usually the anniversary of incorporation or the anniversary of the last annual return filed at Companies House. You may choose an earlier return date but it must not be a later date.	
	Please give the annual return made up date. The return date must not be a future date. The annual return must be delivered within 28 days of the date given below.		
Date of this return ®	0 0 3 m1 1 72 70 70 79		
A3	Registered office address o		
	Please give the registered office address of your company.	Change of registered office This must agree with the address that is held on the Companies House records at the date of this return. If the registered office address has changed, you should complete form LL AD01 and submit it together with	
Building name/number	THE OLD WILL		
Street	LITTLE CLANFIELD		
	Oxford		
Post town		this annual return.	
County/Region	OXFORDSHIRE		
Postcode	0 x 1 8 2 R x		
A4	Single alternative inspection location (SAIL) of the LLP records (if applicable) 9		
Building name/number		SAIL address	
Street		This must agree with the address that is held on the Companies House records at the date of this return.	
Post town		If the address has changed, you should complete form LL ADO2 and	
County/Region		 submit it together with this annual return. 	
Postcode		İ	

LL AR01

Annual Return of a Limited Liability Partnership (LLP)

Part 2 Officers of the LLP

This section should include details of the LLP members at the date to which this annual return is made up.

- → For a member who is an individual, go to Section B1.
- → For a corporate member, go to Section C1.

Once Part 2 has been completed, please go to Part 3 'Signature'.

Continuation pages

Two pages have been included in the form for details of members who are individuals and two pages have been included for details of corporate members.

Please use a continuation page if you need to enter any more officer details.

Member

B1	Member details •		
	Please use this section to list all the members of the LLP. For a corporate member, complete Sections C1-C4.	Member appointments You may not use this form to appoint a member. To do this, please	
Title*	me	complete form LL APO1 and submit it together with this annual return. Corporate details Please use Section C1-C4 to enter corporate member details.	
Full forename(s)	NAOL		
Surname	HODZON		
Former name(s) • Country/State of	ENGLAND	Member details All details must agree with those previously notified to Companies House. If you have made changes since the last annual return and	
residence		have not notified us, please complete form LL CH01.	
Date of birth	10 13 10 14 11 19 15 11	Former name(s) Please provide any previous names	
Designated member	Please tick this box if you are a designated member.	which have been used for business purposes during the period of this return. Married women do not need to give former names unless previously used for business purposes.	

B2	Member's service address &
Building name/number	
Street	CHURCH STREET
Post town	FARINGDON
County/Region	OXFLRDSHIRE
Postcode	SN7 8AD
Country	ENGLAND

If you have previously notified Companies House that the service address is at 'The LLP's registered office', please state 'The LLP's registered office' in the address.

This information will appear on the public record.

Member ,			
B1	Member details •		
	Please use this section to list all the members of the LLP. For a corporate member, complete Sections C1-C4.	Member appointments You may not use this form to appoint a member. To do this, please	
Title*	ml	complete form LL AP01 and submit it together with this annual return. Corporate details Please use Section C1-C4 to enter corporate member details.	
Full forename(s)	ANDREW		
Surname	TRIGG		
Former name(s) 2		Member details All details must agree with those previously notified to Companies	
Country/State of residence	WALES	House. If you have made changes since the last annual return and have not notified us, please complete form LL CH01.	
Date of birth	1 2 m m y y y y y y y 8	⊘ Former name(s)	
Designated member	Please tick this box if you are a designated member.	Please provide any previous names which have been used for business purposes during the period of this return. Married women do not need to give former names unless previously used for business purposes.	
B2	Member's service address [●]		
Building name/number	4	If you have previously notified Companies House that the service	
Street	AVENUE COURT	address is at 'The LLP's registered	
	Avenue ROAD	office', please state 'The LLP's registered office' in the address.	
Post town	ABERGAVENNY	This information will appear on the	
County/Region	MONDUOTHINIRE	public record.	
Postcode	14611100		
Country	WALES		

LL AR01 Annual Return of a Limited Liability Partnership (LLP) Have you completed all the LLP officer details? → Yes Go to Part 3 'Signature'. → No Please make sure all the officer details, at the time of this return, have been completed. Part 3 **Signature** This must be completed by all LLPs. I am signing this form on behalf of the LLP. Signature X X This form may be signed by: Designated member, Judicial factor.