



**Partnership Act
Annual Return
Limited Liability Partnership
Form 3**

Please print clearly or type

Commercial Registrations Division

1 Name of Limited Liability Partnership		
2 LLP Number		3 Annual Return for the Period Ending
4 Have you changed your mailing address? If yes, please indicate the new address below. YES <input type="checkbox"/> NO <input type="checkbox"/>		
5 Has the name and residential address of the designated partner in the province changed? YES <input type="checkbox"/> NO <input type="checkbox"/>		
If you have changed your designated partner in the province, have you notified the Registry? YES <input type="checkbox"/> NO <input type="checkbox"/>		
If you have changed your designated partner in the province and have not yet notified the Registry, please complete and forward a Notice of Change Form with the applicable filing fee.		
6 Have you changed your registered office? YES <input type="checkbox"/> NO <input type="checkbox"/>		
If you have changed your registered office, have you notified the Registry? YES <input type="checkbox"/> NO <input type="checkbox"/>		
If you have changed your registered office and have not yet notified the Registry, please complete and forward a Notice of Change Form with the applicable filing fee.		
7 The signature of a partner is required		
Date	Signature of Partner	Position Held
Please Print Partners Name		Telephone Number

Registry of Limited Liability Partnerships
Commercial Registrations Division,
Digital Government and Service NL
P.O. Box 8700, 59 Elizabeth Avenue
St. John's, NL A1B 4J6 Telephone (709)729-3317

INSTRUCTIONS

Item 1

State the name of the Limited Liability Partnership.

Item 2

State the Newfoundland and Labrador registration number of the Limited Liability Partnership.

Item 3

State the date for the annual return period ending. The period ending date is the last calendar day prior to the registration date. (For example: If your LLP was registered December 15, 2009 the first annual return will be for the period ending December 14, 2010.)

Item 4

Please check yes or no if your mailing address has changed. (If the mailing address has changed include full details of the new address in the box provided including postal code.)

Item 5

Please check yes or no if the name and residential address of the designated partner in the province has changed. If yes, please indicate if you have notified the Registry of the change. (If the designated partner in the province has changed please complete and forward a Notice of Change Form with the applicable filing fee.)

Item 6

Please check yes or no if your registered office has changed. If yes please indicate if you have notified the Registry of the change. (If the registered office address has changed please complete and forward a Notice of Change Form with the applicable filing fee.)

Item 7

The partner must state their name and affix their signature.

PLEASE NOTE

The filing fee for this form is \$75.00. Please make cheque payable to Newfoundland Exchequer Account.