

**Guernsey Registry**

Market Building, PO Box 451,  
Fountain Street, St. Peter Port,  
Guernsey, GY1 3GX

**Annual Validation Amendment - LP**

For more information, please see the guidance notes available on the Guernsey Registry website - [www.guernseyregistry.com](http://www.guernseyregistry.com)

Tel: +44 (0) 1481 743800

Email: [enquiries@guernseyregistry.com](mailto:enquiries@guernseyregistry.com)

**Company details:**

1. Limited partnership registration number:

2. Annual Validation year (as at 31st May):

3. Limited partnership name:

4. Nature and purpose of business:

5. Date of commencement of term:

6. Date of expiration of term (if known):

7. Term of Limited Partnership:

8. Economic activity code:

**Note:** Further information on economic activity codes can be found at [www.gov.gg/ecodes](http://www.gov.gg/ecodes).

9. Registered office address  
(including postcode):

10. Principal place of business:

**General partner details:**

11. Please state all current general partners of the limited partnership below. If the general partner is an overseas entity it must be registered as an overseas corporate director before submitting this form.

General partner name	General partner address	Reg. No.	Start date

**Note:** If there are more than 3 general partners please state on an additional sheet.

**Presenter details:**

12. Name:

13. Address:

14. Email address:

15. Telephone no:

16. Your reference:

**Declarations:**

17. Please tick the following boxes to indicate whether the statements are correct:

- The limited partnership has complied with section 15 of the Limited Partnerships (Guernsey) Law, 1995 (keeping of accounts, records and other documents) over the course of the previous year
- The limited partnership has appointed auditors under section 16 of the Limited Partnerships (Guernsey) Law, 1995 to act in relation to its affairs
- The validation contains information current as at the 31st May in the calendar year in which it is required to be delivered

**Declaration of Compliance (Annual Validation)**

- By ticking this box you declare that all the requirements of the Limited Partnerships (Fees, Annual Validations and Miscellaneous Provisions) Regulations, 2016 in respect of the annual validation have been complied with

18. Signature of general partner or authorised corporate services provider:

19. Date of signature: