

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 17, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # L03000010561**

1. Entity Name  
MIDWEST MANAGEMENT SERVICES, L.L.C.



Principal Place of Business  
2400 W 59TH ST  
MISSION HILLS, KS 66208

Mailing Address  
PO BOX 8670  
SHAWNEE MISSION, KS 66208



03122008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
75-3108704

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

LANE, GLENN  
10935 SE 177TH PLACE #305  
SUMMERFIELD, FL 34491

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reconstituting)

DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

**B. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	REINTJES, MARY
STREET ADDRESS	2400 W 59TH ST
CITY-ST-ZIP	MISSION HILL, KS 66208
TITLE	MGR
NAME	REINTJES, STEPHEN L
STREET ADDRESS	2400 W 59TH ST
CITY-ST-ZIP	MISSION HILLS, KS 66208
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

U000000862341  
04/03/08-80045-010 143.75

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**

*Stephen L Reintjes* **STEVE REINTJES**

3/14/8

913-362-6352

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #