

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001250

FILED
Jul 16, 2004
Secretary of State

Entity Name: MIDWEST MEDICAL SERVICES, L.L.C.

Current Principal Place of Business:

4280 BLUE STEM ROAD
CHARLESTON, IL 61920

New Principal Place of Business:

Current Mailing Address:

4280 BLUE STEM ROAD
CHARLESTON, IL 61920

New Mailing Address:

FEI Number: 37-1392619

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEXISNEXIS DOCUMENT SOLUTIONS INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: BUENTING, PAUL A
Address: 109 S WEST STREET
City-St-Zip: GIFFORD, IL 61847

Title: MGRM () Delete
Name: DIEL, GEORGE F
Address: 401 N MERIDIAN
City-St-Zip: TOLEDO, IL 62468

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: NEWTON, DARRYL L
Address: 301 WILSON
City-St-Zip: NEWTON, IL 62448

Title: MGRM (X) Change () Addition
Name: DIEL, GEORGE F
Address: 1415 CR 50 N
City-St-Zip: GREENUP, IL 62428

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DARRYL L. NEWTON

MGR

07/16/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date