

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000002382

FILED  
Jan 16, 2008  
Secretary of State

Entity Name: MIDWEST MEDICAL REVIEW, LLC

**Current Principal Place of Business:**

11258 CORNELL PARK, STE 600  
CINCINNATI, OH 45242

**New Principal Place of Business:**

7392 LIBERTY ONE DR.  
MIDDLETOWN, OH 45044

**Current Mailing Address:**

11258 CORNELL PARK, STE 600  
CINCINNATI, OH 45242

**New Mailing Address:**

7392 LIBERTY ONE DR.  
MIDDLETOWN, OH 45044

FEI Number: 04-3797317

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KINDNESS, GEORGE  
Address: 11258 CORNELL PARK, STE 600  
City-St-Zip: CINCINNATI, OH 45242

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: KINDNESS, GEORGE  
Address: 7392 LIBERTY ONE DR.  
City-St-Zip: MIDDLETOWN, OH 45044

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GEORGE KINDNESS

MGRM

01/16/2008

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