

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000002875

**FILED**  
**Apr 24, 2008**  
**Secretary of State**

**Entity Name:** NES INDIANA PARTNERS, LLC

**Current Principal Place of Business:**

8770 W. BRYN MAWR AVE., 4TH FL  
CHICAGO, IL 60631

**New Principal Place of Business:**

5440 N. CUMBERLAND AVE.  
SUITE 200  
CHICAGO, IL 60656

**Current Mailing Address:**

8770 W. BRYN MAWR AVE., 4TH FL  
CHICAGO, IL 60631

**New Mailing Address:**

5440 N. CUMBERLAND AVE.  
SUITE 200  
CHICAGO, IL 60656

**FEI Number:** 74-2985311

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331 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: S ( ) Delete  
Name: MILLIGAN, MICHAEL D  
Address: 8770 W. BRYN MAWR AVE., 4TH FL  
City-St-Zip: CHICAGO, IL 60631

**ADDITIONS/CHANGES:**

Title: S (X) Change ( ) Addition  
Name: MILLIGAN, MICHAEL D  
Address: 5440 N. CUMBERLAND AVE. SUITE 200  
City-St-Zip: CHICAGO, IL 60656

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: MICHAEL D. MILLIGAN

SECT

04/24/2008

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