2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State
04-03-2006 90796 001 ***750.00

DOCUMENT # P33676

1. Entity Name
FRESENIUS MEDICAL CARE HOLDINGS, INC.

Principal Place of Business	Mailing Address
95 HAYDEN AVE LEXINGTON, MA 02420 US	ATTN: TAX DEPT. 95 HAYDEN AVENUE LEXINGTON, MA 02420-9192 US

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03232006 Chg-P CR2E034 (11/05)

4. FEI Number 13-3461988 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LIPPS, BEN P 95 HAYDEN AVE LEXINGTON, MA 02420	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition See attached
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFOT BROSNAN, MICHAEL 95 HAYDEN AVE LEXINGTON, MA 02420	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT LIEBERMAN, MARC 95 HAYDEN AVENUE LEXINGTON, MA 02420	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS KOTT, DOUGLAS 95 HAYDEN AVENUE LEXINGTON, MA 02420	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BROSNAN, MICHAEL 95 HAYDEN AVENUE LEXINGTON, MA 02420	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT FAWCETT, MARK 95 HAYDEN AVENUE LEXINGTON, MA 02420	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Marc S. Lieberman **Assistant Treasurer** 3/23/06 781-402-9000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT 660083380

#P33676

FRESENIUS MEDICAL CARE HOLDINGS, INC.

FEIN 13-3461988

LIST OF OFFICERS AND DIRECTORS
EFFECTIVE 01/18/06

DIRECTORS	*OFFICE*
MICHAEL BROSNAN	DIRECTOR
RONALD J. KUERBITZ	DIRECTOR
BEN J. LIPPS	DIRECTOR
RICE POWELL	DIRECTOR
LAWRENCE A. ROSEN	DIRECTOR
RAINER RUNTE	DIRECTOR
MATS WAHLSTROM	DIRECTOR

OFFICERS	*OFFICE*
RONALD J. KUERBITZ	CHIEF ADMINISTRATIVE OFFICER & SECRETARY
RICE POWELL	CO-CHIEF EXECUTIVE OFFICER
MATS WAHLSTROM	CO-CHIEF EXECUTIVE OFFICER
MICHAEL BROSNAN	CHIEF FINANCIAL OFFICER & TREASURER
J. MICHAEL LAZARUS, M.D.	SR. VICE PRESIDENT
MARK FAWCETT	ASSISTANT TREASURER
MARC LIEBERMAN	ASSISTANT TREASURER
DOUGLAS G. KOTT	ASSISTANT SECRETARY

CORPORATE HEADQUARTERS
95 HAYDEN AVENUE
LEXINGTON, MA 02420-9192