FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # F9600006831 (9)

RENAL TREATMENT CENTERS - TEXAS. INC.

Principal Place of Business Mailing Address 1180 W SWEDESFORD RD BLDG 2 #300 1180 W SWEDESFORD RD BLDG 2 #300 BEWYN PA 19312-1077 **BEWYN PA 19312** 3. Date Incorporated or Qualified Sa. Date of Last Report 12/27/1996 2, Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 23-2791135 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country Zip Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CORPORATION SERVICE COMPANY 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) 82 TALLAHASSEE FL 32301-2525 83 84 City Z_Ip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typed or printed name of registered agent and title if applicable (NOTE: Repistered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE 1:116 DCP 1.1 TITLE MAYER, ROBERT L JR 12 NAME NAME 1180 W SWEDESFORD RD BLDG 2 #300 1.3 STREET ADDRESS STREET ADDRESS **BEWYN PA 19312** 1.4 City-ST-ZIP CHTY - ST - ZIE Addition Change □ DELETE THLE DCVT 2.1 TITLE JANSEN, FREDERICK C 22 NAME NAME 1180 W SWEDESFORD RD BLDG 2 #300 2.3 STREET ADDRESS STREET ADDRESS **BEWYN PA 19312** 2.4 CITY-ST-ZIP CITY-ST-Z# Addition DELETE Change D۷ 3.1 TITLE TIBLE BEDNAR, BARBARA 3.2 NAME NAME 1180 W SWEDESFORD RD BLDG 2 #300 3.3 STREET ADDRESS STREET ADDRESS **BEWYN PA 19312** 3.4. CITY-ST-ZIP CITY ST-ZIP Addition Change DELETE 4.1 TITLE TIFLE KARL, THOMAS J NAME 4. 2 NAME 1180 W SWEDESFORD RD BLDG 2 #300 STREET ADDRESS 4.3 STREET ADDRESS **BEWYN PA 19312** 4.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE Title 5.1 TITLE RODGERS, RONALD H NAME 5.2 NAME 1180 W SWEDESFORD RD BLDG 2 #300 STREET ADDRESS 5.3 STREET ADDRESS **BEWYN PA 19312** CITY - ST- ZiP 5.4 CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TILLE

6.2 NAME

with an address.

6.3 STREET ADORESS

6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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

SIGNATURE:

appears in Block 12 or Block 13 if changed, or on an attachment

NAM5 STREET ADDRESS

CHTY-ST-7IP

FILED

Apr 01 1997 8:00am

Secretary of State