2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2010
Secretary of State

DOCUMENT# G69331

Entity Name: RENAL CARE OF OIL CITY, INC.

Current Principal Place of Business:

DREILING MEDICAL MANAGEMENT
407 LINCOLN ROAD STE 700
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

DREILING MEDICAL MANAGEMENT
407 LINCOLN ROAD STE, 700
MIAMI BEACH, FL 33139 US

Current Mailing Address:

DREILING MEDICAL MANAGEMENT
407 LINCOLN ROAD STE 700
MIAMI BEACH, FL 33139 US

New Mailing Address:

DREILING MEDICAL MANAGEMENT
407 LINCOLN ROAD STE, 700
MIAMI BEACH, FL 33139 US

FEI Number: 25-1469170 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BINSTOCK, ALEX
9100 S DADELAND BLVD STE 1600
MIAMI, FL 331567815 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD
Name: LEASE, JUDY
Address: 407 LINCOLN RD., STE. 700
City-St-Zip: MIAMI BEACH, FL 33139

Title: S
Name: BROOKER, DAVID
Address: 6945 US RT. 322, P.O. BOX 508
City-St-Zip: CRANBERRY, PA 16319

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JUDY LEASE PTD 01/07/2010

Electronic Signature of Signing Officer or Director Date