

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000053110

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** KIDNEY INSTITUTE OF CLEARWATER, LLC

**Current Principal Place of Business:**

617 LAKEVIEW ROAD  
SUITE C  
CLEARWATER, FL 337563338

**New Principal Place of Business:**

**Current Mailing Address:**

1964 BAYSHORE BLVD.  
SUITE C  
DUNEDIN, FL 34698

**New Mailing Address:**

**FEI Number:** 20-2920218

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLARK, JUNE A  
1964 BAYSHORE BLVD  
SUITE C  
DUNEDIN, FL 34698 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: THE KIDNEY GROUP, LLC  
Address: 19275 ALTA VISTA CIRCLE  
City-St-Zip: BROOKFIELD, WI 53045

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JUNE A. CLARK

VP

04/30/2009

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