

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000059790

FILED
Apr 20, 2009
Secretary of State

Entity Name: NEPHROLOGY MANAGEMENT GROUP, L.L.C.

Current Principal Place of Business:

9193 SW 72 STREET #200
MIAMI, FL 33175

New Principal Place of Business:

9193 SW 72 STREET
SUITE 200
MIAMI, FL 33173

Current Mailing Address:

9193 SW 72 STREET #200
MIAMI, FL 33175

New Mailing Address:

9193 SW 72 STREET
SUITE 200
MIAMI, FL 33173

FEI Number: 20-3105850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SACHER, CHARLES P
2655 LEJEUNE ROAD STE 1101
CORAL GABLES, FL 33134 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: MGR () Delete
Name: PELLEGRINI, EDGARDO L M.D.
Address: 9193 SW 72 STREET #200
City-St-Zip: MIAMI, FL 33175

Title: MGR () Delete
Name: BUSSE, JORGE M.D.
Address: 9193 SW 72 STREET #200
City-St-Zip: MIAMI, FL 33175

Title: MGR () Delete
Name: BARRETO, GASPAR A M.D.
Address: 9193 SW 72 STREET #200
City-St-Zip: MIAMI, FL 33175

Title: MGR () Delete
Name: GOMEZ, EMILIO J M.D.
Address: 9193 SW 72 STREET #200
City-St-Zip: MIAMI, FL 33175

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PELLEGRINI, EDGARDO L M.D.
Address: 9193 SW 72 STREET #200
City-St-Zip: MIAMI, FL 33173

Title: MGR (X) Change () Addition
Name: BUSSE, JORGE M.D.
Address: 9193 SW 72 STREET #200
City-St-Zip: MIAMI, FL 33173

Title: MGR (X) Change () Addition
Name: BARRETO, GASPAR A M.D.
Address: 9193 SW 72 STREET #200
City-St-Zip: MIAMI, FL 33173

Title: MGR (X) Change () Addition
Name: GOMEZ, EMILIO J M.D.
Address: 9193 SW 72 STREET #200
City-St-Zip: MIAMI, FL 33173

Title: MGR () Change (X) Addition
Name: TRESPALACIOS, FERNANDO C M.D.
Address: 9193 SW. 72 STREET #200
City-St-Zip: MIAMI, FL 33173

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: EDGARDO L. PELLEGRINI

MGR

04/20/2009

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