2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# M05000007093

Entity Name: DAVITA RX, LLC

Current Principal Place of Business:

601 HAWAII STREET
EL SEGUNDO, CA 90245

New Principal Place of Business:

Current Mailing Address:

601 HAWAII STREET
EL SEGUNDO, CA 90245

New Mailing Address:

FEI Number: 20-3998217 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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:	VP	( ) Delete
Name:	GOLOMB, JOSH	
Address:	601 HAWAII STREET	
City-St-Zip:	EL SEGUNDO, CA 90245	
Title:	PRES	( ) Delete
Name:	HUGHSON, WILLIAM	
Address:	601 HAWAII STREET	
City-St-Zip:	EL SEGUNDO, CA 90245	
Title:	TRE	( ) Delete
Name:	SEAY, H.W. GUY	
Address:	601 HAWAII STREET	
City-St-Zip:	EL SEGUNDO, CA 90245	
Title:	SEC	( ) Delete
Name:	POLK, CORINNA	
Address:	601 HAWAII STREET	
City-St-Zip:	EL SEGUNDO, CA 90245	
Title:	VPF	( ) Delete
Name:	KIM, CHERYL	
Address:	601 HAWAII STREET	
City-St-Zip:	EL SEGUNDO, CA 90245	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: CORINNA POLK SEC 01/16/2009

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