2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M0600000015

1. Entity Name

RENAL PROPERTIES - SANFORD, LLC

FILED Apr 30, 2008 08:00 AN Secretary of State

Principal Place of Business

511 UNION STREET, SUITE 1800 NASHVILLE, TN 37219 Mailing Address

511 UNION STREET, SUITE 1800 NASHVILLE, TN 37219



04172008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2909008 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

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The above named entity submits this statement for the purpose of changing its registers the obligations of registered agent.	ed office or registered agent, or both, in the State of Florida.	I am familiar with, and accept
SIGNATURE	A hank anning on the what surelying	DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000936482 05/27/08-80012-020 138.75

9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TANNENBAUM, JEROME S MD, PHD 511 UNION STREET. SUITE 1800 NASHVILLE, TN 37219		
NAME STREET ADDRESS CITY-ST-ZIP		,	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information			

11. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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

URE AND TOPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/17/08 (415)777-8200