## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P30615

Entity Name: TOTAL RENAL CARE, INC.

FILED May 08, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
601 HAWAII STREET EL SEGUNDO, CA 90245 US					
Current Mailing Address:			New Mailing Address:		
601 HAWAII STREET EL SEGUNDO, CA 90245 US					
FEI Number: 95-3372911 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )					
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US					
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	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	DCEO ( ) De KENT, THIRY J 601 HAWAII STREI EL SEGUNDO, CA	ĒΤ	Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	COO () De MELLO, JOSEPH 601 HAWAII STRE EL SEGUNDO, CA	ĒΤ	Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	VPS () De SCHOHL, JOSEPH 601 HAWAII STRE EL SEGUNDO, CA	ΞΤ	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	CFO () De HARRISON, MARK 601 HAWAII STREI EL SEGUNDO, CA	ET	Title: Name: Address: City-St-Zip:	CFO (X) Change ( ) Addition WHITNEY, RICHARD 601 HAWAII STREET EL SEGUNDO, CA 90245	
Title: Name: Address: City-St-Zip:	AS () DE POLK, CORINNA 601 HAWAII STREI EL SEGUNDO, CA	ĒΤ	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	( ) De	lete	Title: Name: Address: City-St-Zip:	VP ( ) Change (X) Addition SEAY, H.W. GUY 601 HAWAII STREET EL SEGUNDO, CA 90245	
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 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 an address, with all other like empowered.					

SIGNATURE: CORINNA POLK 05/08/2008 AS