

No. W 56398		Due no later than Nov 30, 2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. LIBERTY DIALYSIS-NAMPA LLC ADRIAN DAVID 7650 SE 27TH STREET SUITE 200 MERCER ISLAND WA 98040-3060		RECORD SEARCH AMERICA INC 2219 N CURTIS RD BOISE ID 83706			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address		City	State	Country	Postal Code
MEMBER	CAPUTO M	BOISE DIALYSIS, LLC	7650 SE 27TH STREET SUITE 200	MERCER ISLAND	WA	USA	98040-3060
5. Organized Under the Laws of: DE W 56398		6. Annual Report must be signed.* Signature: Ryan B Pardo Name (type or print): Ryan B Pardo Date: 12/18/2009 Title: Vice President					
Processed 12/18/2009 * Electronically provided signatures are accepted as original signatures.							