No. W 1754		Due no later than Nov 30, 2011		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF		Annual Report Form 1. Mailing Address: Correct in this box if needed. KIDNEY PHYSICIANS OF IDAHO, L.L.C. MICHEAL J. ADCOX, M.D. 333 N. 1ST STREET, SUITE 140 BOISE ID 83703		MICHAEL J ADCOX MD 333 N. 1ST STREET, SUITE 140 BOISE ID 83703 3. New Registered Agent Signature:*				
RECEIVED BY DU		mes and Addresses (of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER MEMBER MEMBER MEMBER MEMBER	JON WAGNILD MD NAGRAJ NARASIMHAN MD MICHAEL ADCOX MD ROBERT L DAVIDSON MICHAEL C MALLEA		5610 W GAGE STE A 5610 W GAGE STE A 333 N. 1ST STREET, SUITE 140 5610 W GAGE STE A 5610 W GAGE STE A	BOISE BOISE BOISE BOISE BOISE	ID ID ID ID	USA USA USA USA USA	83706 83706 83703 83706 83706	
5. Organized Under the Laws of:		6. Annual Report m						
ID W 1754		Signature: Micheal J. Adcox Name (type or print): Micheal J. Adcox		Date: 12/20/2011 Title: Managing Member				
Processed 12/20/2011 * Electronically provided signatures are accepted as original signatures.								