


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90322 007 ***150.00

DOCUMENT # 833817

1. Entity Name
CHOICEPOINT SERVICES INC.



Principal Place of Business Mailing Address
1000 ALDERMAN DR. **1000 ALDERMAN DR.**
ALPHARETTA, GA 30005 US **ALPHARETTA, GA 30005 US**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

40071820



04182006 Chg-P CR2E034 (11/05)

4. FEI Number Applied For
58-1276168 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD SMITH, DEREK V 1000 ALDERMAN DR. ALPHARETTA, GA 30005	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE JANES, J. MICHAEL 1000 ALDERMAN DR. ALPHARETTA, GA 30005	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TRINE, DAVID E 1000 ALDERMAN DR. ALPHARETTA, GA 30005	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP LEE, DAVID T 1000 ALDERMAN DR. ALPHARETTA, GA 30005	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS YOUNG, MARY M 1000 ALDERMAN DR. ALPHARETTA, GA 30005	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DAVIS, DAVID 1000 ALDERMAN DR. ALPHARETTA, GA 30005	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Jeffrey J. Glazer 1000 Alderman Drive Alpharetta, GA 30005	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer John M. Mongelli 1000 Alderman Drive Alpharetta, GA 30005	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFD David E. Trine 1000 Alderman Drive Alpharetta, GA 30005	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO David T. Lee 1000 Alderman Drive Alpharetta, GA 30005	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John M. Mongelli 4/25/06 _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT 40071820
#833817

ChoicePoint Services Inc.

Officers:

David T. Lee, Chief Executive Officer
Jeffrey J. Glazer, President
Steven W. Surbaugh, EVP and Chief Administrative Officer
David E. Trine, Chief Financial Officer
J. Michael de Janes, General Counsel
David W. Davis, Secretary
John M. Mongelli, Treasurer
Mary M. Young, Assistant Secretary

Business Address:

Directors:

Derek V. Smith, Chairman
Douglas C. Curling
J. Michael de Janes

1000 Alderman Dr., Alpharetta, GA 30005