

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 833817

FILED  
Feb 15, 2010  
Secretary of State

Entity Name: LEXISNEXIS RISK SOLUTIONS INC.

**Current Principal Place of Business:**

1000 ALDERMAN DR.  
ALPHARETTA, GA 30005 US

**New Principal Place of Business:**

**Current Mailing Address:**

1000 ALDERMAN DR.  
ALPHARETTA, GA 30005 US

**New Mailing Address:**

FEI Number: 58-1276168      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PECK, JAMES  
Address: 1000 ALDERMAN DR.  
City-St-Zip: ALPHARETTA, GA 30005

Title: S  
Name: THOMPSON, KENNETH  
Address: 1000 ALDERMAN DR.  
City-St-Zip: ALPHARETTA, GA 30005

Title: CFO  
Name: SCHMITT, REBECCA  
Address: 1000 ALDERMAN DR.  
City-St-Zip: ALPHARETTA, GA 30005

Title: VP  
Name: RENEE, SIMONTON  
Address: 1105 NORTH MARKET ST, WUITE 501  
City-St-Zip: WILMINGTON, DE 19801

Title: T  
Name: KENNETH, FOGARTY  
Address: 2 NEWTON PLACE, SUITE 350  
City-St-Zip: NEWTON, MA 02458

Title: D  
Name: HORBACZEWSKI, HENRY  
Address: 2 NEWTON PLACE, SUITE 350  
City-St-Zip: NEWTON, MA 02458

I hereby 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 all other like empowered.

SIGNATURE: RENEE SIMONTON

VP

02/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date