## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

849133

(4)

EQUIFAX INVESTMENTS (U.S.) INC.

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Principal Place of	of Business	Mailing Addres	<del></del>			T 108301 10315 OFBER JOHN HOUR FIRE BINIT OFFI DIGH OIDH OIDH OIDH OIDH OIDH OIDH OIDH	
P.O. BOX 44		P.O. BOX	1800 PEACHTREE ST., N.W. P.O. BOX 4081				
ATLANTA GA 30309		AILANIA (	ATLANTA GA 30309			3. Date incorporated or Qualified 3a. Date of Last Report	
						05/14/1981 04/25/1995	
2. Principal Plac	ce of Business	2a. Mailing Add	ress			4. FEI Number Applied For	
21	ato	26 Suite Act	+ nto			36-2204664 Not Applicable	
Suite, Apt. #.	, etc.	Suite, Apt.				5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State		<u> </u>	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
23	Country		Zip Country			Added to Fees	
Z <sub>I</sub> p <b>24</b>	Country 25	Zip <b>29</b>	30	uriti y		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No	
[24]	9. Name and Address of Curre			T		10. Name and Address of New Registered Agent	
			·	81	Name		
THE PRENTICE-HALL CORPORATION SYSTEM, INC.				82	Street Ac	ddress (P.O. Box Number is Not Acceptable)	
1201 H	AYS STREET			83	ļ		
SUITE TALLAR	105 HASSEE FL 32301			84	City	85 Zip Code	
					City	FL	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE _		and and title if prelimble	AIOTE Parietara	4 4000	ot emost we can	pured when reinstating) DATE	
Signature, typed or printed name of registured agent and title if applicable.  12. OFFICERS AND DIRECTORS			13.		it signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TOTLE	Р	<b>X</b> DE	LETE 1.1	TITLE	P	P/vc/D Change 🔀 Addition	
NAME	MCWEY, J.C.	_	•	IAME	'	DAN W. MC GLAUGHLIN	
STREET ADDRESS	9085 NESBIT LAKES		1.3 \$	TREET	ADDRESS	3430 TUXEDU ROAD	
CITY-ST-ZIP	ALPHARETTA GA		1.4 0	HTY-S		ATLANTA, GA	
TITLE	T	(2/08	LETE 2 1	TITLE		Change Addition	
NAME	HAYGOOD, RALPH F.		221	IAME	}	MARIETTA E. ZAKAS 3085 E. PINE VEILLY ROAD ATLANTA, GA	
STREET ADDRESS	1490 DANSFORD CT		2.3 5	TREET	ADDRESS	3085 E. FINE VOILY ROM	
CITY - S1 - ZIP	MARIETTA GA		240	ITY-S	31 - ZIP	ATLANTA, GA	
TITLE	AVP	☐ DE	LETE 3.1	TITLE		Change Addition	
NAME	STAGMEIER, JOHN H.		3.21	IAME			
STREET ADDRESS	2170 NORTHFIELD CT N.	. <b>E</b> .	3.3	STREET	T ADDRESS		
CITY - ST - ZIP	MARIETTA GA			CITY-S	ST-ZIP	Physical Control of the Control of t	
TITLE	VC	<b>⊠</b> DE	LETE 4.1	TITLE		Change Addition	
NAME	DAWSON, JOSEPH E		421	AME			
STREET ADDRESS	3540 TOWNSHIP VALLEY	CT.			ADDRESS		
City-S1-ZiP	MARIETTA GA				ST-ZIP	A	
TITLE	C	☐ DE		TITLE	13	<b>D</b> □ Change 🔀 Addition	
NAME	ROGERS, C.B. JR.			IAME			
STREET ADDRESS	2660 PEACHTREE DR				T ADDRESS		
CITY-ST-ZIP	atlanta ga				ST-ZIP		
TITLE	\$	DE		TITLE		Change Addition	
NAME	MAGIS, THOMAS H.			NAME			
STREET ADDRESS	7235 DUNCOURTNEY DE	₹.	633	STREET	T ADDRESS		
CITY-ST-ZIP	SANDY SPRING GA		640	CITY - S	ST-ZIP	or f. d	

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 3 if changed, or on an attachment with an address.

SIGNATURE: \_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Depting Proce #

849133

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## **EQUIFAX INVESTMENTS (U.S.) INC.**

1600 Peachtree Street, N.W. Atlanta, Georgia 30309

RESIDENTIAL ADDRESS
Peachtree Road, Atlanta, Georgia
Tuxedo Road, Atlanta, Georgia
Tuxedo Road, Atlanta, Georgia
Duncourtney Drive, Atlanta, Georgia
Riada Drive, Atlanta, Georgia
E. Pine Valley Road, Atlanta, Georgia
Alderbrook Road, Atlanta, Georgia
,

## **DIRECTORS** NAME

Clarence B. Rogers, Jr. Dan W. McGlaughlin

Donald U. Hallman

**RESIDENTIAL ADDRESS** 2660 Peachtree Road, Atlanta, Georgia 3430 Tuxedo Road, Atlanta, Georgia

2244 Spencer's Way, Stone Mountain, Georgia

<sup>\*\*\*</sup>ALL OFFICERS AND DIRECTORS WERE ELECTED TO THEIR POSITIONS IN APRIL 1996\*\*\*