

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003115

Entity Name: CARFAX, INC.**Current Principal Place of Business:**5860 TRINITY PARKWAY
SUITE 600
CENTREVILLE, VA 20120**Current Mailing Address:**26533 EVERGREEN ROAD
ATTN: TAX DEPARTMENT SUITE900
SOUTHFIELD, MI 48076 US**FEI Number:** 25-1465303**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
% CT CORPORTION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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**Officer/Director Detail :**

Title	P/D
Name	RAINES, RICHARD T
Address	5860 TRINITY PARKWAY, SUITE 600
City-State-Zip:	CENTREVILLE VA 20120

Title	ASAT
Name	LUU, LAN
Address	5860 TRINITY PARKWAY, SUITE 600
City-State-Zip:	CENTREVILLE VA 20120

Title	T/D
Name	GOFF, MICHELLE
Address	26533 EVERGREEN ROAD, SUITE 900
City-State-Zip:	SOUTHFIELD MI 48076

Title	D
Name	POLK, STEPHEN R
Address	26533 EVERGREEN ROAD, SUITE 900
City-State-Zip:	SOUTHFIELD MI 48076

Title	S
Name	SIMMS, MELANIE
Address	26533 EVERGREEN ROAD, SUITE 900
City-State-Zip:	SOUTHFIELD MI 48076

Title	AS
Name	BLUMENTHAL, STEVE
Address	5860 TRINITY PARKWAY, SUITE 600
City-State-Zip:	CENTREVILLE VA 20120

Title	DIRECTOR
Name	BARRETT, PATRICK
Address	26533 EVERGREEN ROAD SUITE 900
City-State-Zip:	SOUTHFIELD MI 48076

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: MELANIE SIMMS**SECRETARY****04/17/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date