

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005546

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: FIRST ADVANTAGE SAFERENT, INC.

## Current Principal Place of Business:

12395 FIRST AMERICAN WAY  
POWAY, CA 92064

## New Principal Place of Business:

## Current Mailing Address:

FIRST ADVANTAGE CORPORATION  
ATTN: LEGAL DEPT. 100 CARILLON PARKWAY  
ST. PETERSBURG, FL 33716

## New Mailing Address:

FEI Number: 84-1543043      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: D ( ) Delete  
Name: NALLATHAMBI, ANAND  
Address: 12395 1ST AMERICAN WAY  
City-St-Zip: POWAY, CA 92064

Title: P ( ) Delete  
Name: BARNETT, EVAN  
Address: 12395 1ST AMERICAN WAY  
City-St-Zip: POWAY, CA 92064

Title: EVP ( ) Delete  
Name: FLACK, STEVEN  
Address: 12395 1ST AMERICAN WAY  
City-St-Zip: POWAY, CA 92064

Title: S ( ) Delete  
Name: JARDINE, BRET  
Address: 100 CARILLON PARKWAY  
City-St-Zip: ST. PETERSBURG, FL 33716

Title: D ( ) Delete  
Name: LAMSON, JOHN  
Address: 100 CARILLON PARKWAY  
City-St-Zip: ST. PETERSBURG, FL 33716

Title: D (X) Delete  
Name: WATERS, JULIE A  
Address: 100 CARILLON PARKWAY  
City-St-Zip: ST. PETERSBURG, FL 33716

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BRET T. JARDINE

SEC

04/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date