

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000003658

Entity Name: HIRERIGHT, INC.

FILED  
Apr 17, 2012  
Secretary of State

**Current Principal Place of Business:**

5151 CALIFORNIA AVE.  
IRVINE, CA 926173059

**New Principal Place of Business:**

**Current Mailing Address:**

5151 CALIFORNIA AVE.  
IRVINE, CA 926173059

**New Mailing Address:**

FEI Number: 33-0465016

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

**OFFICERS AND DIRECTORS:**

Title: EC  
Name: CASEY, JAMES P  
Address: 5151 CALIFORNIA AVE.  
City-St-Zip: IRVINE, CA 926173059

Title: VPS  
Name: FONTAINE, DAVID R  
Address: 5151 CALIFORNIA AVE.  
City-St-Zip: IRVINE, CA 926173059

Title: AS  
Name: FREEMAN, GREGG  
Address: 5151 CALIFORNIA AVE.  
City-St-Zip: IRVINE, CA 926173059

Title: VCFO  
Name: MAYO, MARK  
Address: 5151 CALIFORNIA AVE.  
City-St-Zip: IRVINE, CA 926173059

Title: PCEO  
Name: PETRULLO, MICHAEL  
Address: 5151 CALIFORNIA AVE.  
City-St-Zip: IRVINE, CA 926173059

Title: VAS  
Name: SIMMONS, KEITH R  
Address: 5151 CALIFORNIA AVE.  
City-St-Zip: IRVINE, CA 926173059

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: DAVID R. FONTAINE

VPS

04/17/2012

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

\_\_\_\_\_  
Date