2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2012
Secretary of State

DOCUMENT# F11000004566

Entity Name: LPS DEFAULT SOLUTIONS, INC.

Current Principal Place of Business:

601 RIVERSIDE AVE
JACKSONVILLE, FL 32204

New Principal Place of Business:

Current Mailing Address:

601 RIVERSIDE AVE
JACKSONVILLE, FL 32204

New Mailing Address:

ATTN: APRIL JOHNSON
601 RIVERSIDE AVENUE
JACKSONVILLE, FL 32204

FEI Number: 01-0560689 **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

OFFICERS AND DIRECTORS:

Title: P
Name: SCHEUBLE, DANIEL T
Address: 601 RIVERSIDE AVE
City-St-Zip: JACKSONVILLE, FL 32204

Title: EVP
Name: JOHNSON, TODD C
Address: 601 RIVERSIDE AVE
City-St-Zip: JACKSONVILLE, FL 32204

Title: TREA
Name: ALVARADO, JENNIFER F
Address: 601 RIVERSIDE AVE
City-St-Zip: JACKSONVILLE, FL 32204

Title: ACS
Name: JOHNSON, APRIL L
Address: 601 RIVERSIDE AVE
City-St-Zip: JACKSONVILLE, FL 32204

Title: D
Name: SCHEUBLE, DANIEL T
Address: 601 RIVERSIDE AVENUE
City-St-Zip: JACKSONVILLE, FL 32204

Title: D
Name: JOHNSON, TODD C
Address: 601 RIVERSIDE AVENUE
City-St-Zip: JACKSONVILLE, FL 32204

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: APRIL L. JOHNSON ACS 04/12/2012

Electronic Signature of Signing Officer or Director — Date