

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H13000043362 3)))



H130000433623ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FOREIGN PROFIT/NONPROFIT CORPORATION

LPS Real Estate Data Solutions, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	08
Estimated Charge	\$70.00

**\*RE-SUBMIT\***

Please retain original filing  
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Electronic Filing Menu

Corporate Filing Menu

<https://efile.sunbiz.org/scripts/efilcovr.exe>

MRD 2/28/13

RECEIVED

13 FEB 27 PM 12:08

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13 FEB 25 AM 9:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



February 26, 2013

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: LPS REAL ESTATE SOLUTIONS, INC.  
REF: W13000011614

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Pamela Smith  
Regulatory Specialist II

FAX Aud. #: H13000043362  
Letter Number: 213A00004660

**\*RE-SUBMIT\***

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date of submission 2/25

P.O. BOX 6327 - Tallahassee, Florida 32314

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** LPS Real Estate Data Solutions, Inc.  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

April Johnson

Name of Person

LPS Real Estate Data Solutions, Inc.

Firm/Company

601 Riverside Avenue

Address

Jacksonville, FL 32204

City/State and Zip code

april.johnson@lpsvcs.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Connie Bryan

at ( 850 ) 222-1092

Name of Person

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. LPS Real Estate Data Solutions, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. California

(State or country under the law of which it is incorporated)

3. 95-4237556

(FEI number, if applicable)

4. 08/23/1989

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3100 New York Drive, Suite 100 MS-IDM, Pasadena, CA 91107

(Principal office address)

c/o April Johnson, 601 Riverside Avenue, Jacksonville FL 32204

(Current mailing address)

8. Aggregates public records data pertaining to residential & commercial real estate, ownership, sales, assessments, etc.

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

Florida 33324

(Zip code)

10. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

By: \_\_\_\_\_

CT Corporation System

(Registered agent's signature)

**Madonna Cuddihy**  
**Special Assistant Secretary**

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED  
13 FEB 25 AM 9:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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13 FEB 25 AM 9:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Todd C. Johnson

Address: 601 Riverside Avenue

Jacksonville, FL 32204

Director: Daniel T. Scheuble

Address: 601 Riverside Avenue

Jacksonville, FL 32204

**B. OFFICERS**

President: Daniel Berman

Address: 5 Peters Canyon Road

Irvine, CA 92606

Vice President: Todd C. Johnson

Address: 601 Riverside Avenue

Jacksonville, FL 32204

Secretary: Colleen F. Haley

Address: 601 Riverside Avenue, Jacksonville, FL 32204

Treasurer: Benjamin J. See

Address: 601 Riverside Avenue, Jacksonville, FL 32204

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Todd C. Johnson, Vice President and director

(Typed or printed name and capacity of person signing application)

State of California  
Secretary of State

FILED

13 FEB 25 AM 9:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CERTIFICATE OF STATUS

ENTITY NAME:

LPS REAL ESTATE DATA SOLUTIONS, INC.

FILE NUMBER: C1648205  
FORMATION DATE: 08/23/1989  
TYPE: DOMESTIC CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of February 20, 2013.

*Debra Bowen*

DEBRA BOWEN  
Secretary of State