2003 FOR PROFIT CORPORATION

Mar 18, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR F94000002720 DOCUMENT # 03-18-2003 90071 035 ***150.00 1. Entity Name INTERACTIVE DATA CORPORATION Principal Place of Business Mailing Address 32 CROSBY DRIVE 100 EXECUTIVE DRIVE BEDFORD MA 01730 SUITE 335 WEST ORANGE NJ 07052 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF, MAKING CHANGES City & State City & State 4. FEI Number Applied For 13-3668779 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT_CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and tide if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 19. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition HIRSCHFIELD, ALAN J NAME NAME STREET ADDRESS 1150 FALL CREEK ROAD STREET ADDRESS WILSON WY 83014 CITY-ST-ZIP **CR2E034** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition TESSLER, ALLAN R MAME NAME STREET ADDRESS 1100 W. PINE SISKIN RD. STREET ADDRESS CITY-ST-ZIP JACKSON WY 83001 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME CRANE, STEVEN STREET ADDRESS 4 MICHAEL LANE STREET ADDRESS CITY-ST-ZIP SUDBURY MA 01776 CITY-ST-ZIP TITLE 👿 Delete TITLE ☐ Change ☐ Addition NAME HILL STEPHEN NAME STREET ADDRESS 23 PARKSFIELD PUTNEY STREET ADDRESS CITY-ST-ZIP LONDON SW156NH CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NISIVOCCIA, THOMAS J NAME 12 KNOLLWOOD TRAIL EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MENDHAM NJ 07945 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME CLARK, STUART NAME 74 RODGERS ROAD STREET ADDRESS STREET ADDRESS CITY-ST-7IP CARLISLE MA 01741 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if

SIGNATURE:

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FILED