## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F97000005638

NASHVILLE, TN 37203

City-St-Zip:

Entity Name: INFOPARTNERS, INC.

FILED Jan 22, 2008 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place of	New Principal Place of Business:	
4535 HARDING ROAD, SUITE 200 NASHVILLE, TN 372052120			4535 HARDING ROAD,		
			SUITE 200 NASHVILLE, TN 37205	21	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
SUITE 200	DING ROAD, ) .E. TN 37205:	2120			
	: 62-1261168	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
11380 PR		DNS NETWORK, INC. RMS ROAD #221E IS, FL 33410 US			
	named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	LAWRENCE, I	G ROAD, STE 200	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	LAWRENCE,	G ROAD, STE 200	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	WEBB, WILLIA 2219 RIVERVI		Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address:	HARRINGTON	() Delete , JOHN K N ST., STE. 520	Title: ( Name: Address:	) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: SHERI J. LAWRENCE VP/S 01/22/2008