2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# M01000001260

Entity Name: EQUIFAX INFORMATION SERVICES LLC

Current Principal Place of Business:

1550 PEACHTREE STREET, NW
ATLANTA, GA 30309

New Principal Place of Business:

Current Mailing Address:

1550 PEACHTREE STREET, NW
ATLANTA, GA 30309

New Mailing Address:

FEI Number: 58-2631096 **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

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: GULLEY, DORRIS
Address: 1550 PEACHTREE STREET, NW
City-St-Zip: ATLANTA, GA 30309

Title: MGR ( ) Delete
Name: ADAMS, J. DANN
Address: 1550 PEACHTREE STREET, NW
City-St-Zip: ATLANTA, GA 30309

Title: MGR ( ) Delete
Name: MAST, KENT E
Address: 1550 PEACHTREE STREET, NW
City-St-Zip: ATLANTA, GA 30309

Title: MGR ( ) Delete
Name: HARRIS, KATHRYN J
Address: 1550 PEACHTREE STREET, NW
City-St-Zip: ATLANTA, GA 30309

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: ARVIDSON, DEAN C
Address: 1550 PEACHTREE STREET, NW
City-St-Zip: ATLANTA, GA 30309

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KATHRYN J. HARRIS MGR 04/29/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date