

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004891

FILED
Mar 24, 2009
Secretary of State

Entity Name: TRANSUNION CRIF DECISION SOLUTIONS, LLC

Current Principal Place of Business:

2701 N ROCKY POINT DR
STE 110
TAMPA, FL 33607

New Principal Place of Business:

555 WEST ADAMS STREET
CHICAGO, IL 60661

Current Mailing Address:

555 W ADAMS ST
CHICAGO, IL 60661

New Mailing Address:

FEI Number: 16-1665113

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRIBIS CORPORATION
2701 N ROCKY POINT DR
STE 110
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

CRIBIS CORPORATION
3505 E. FRONTAGE ROAD
STE 175
TAMPA, FL 336071762 US

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:

03/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CRIBIS CORPORATION,
Address: 2701 N ROCKY POINT DR, STE 110
City-St-Zip: TAMPA, FL 33607

Title: MGRM () Delete
Name: TU INTERNATIONAL, IN, C.
Address: 555 W. ADAMS
City-St-Zip: CHICAGO, IL 60661

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CRIBIS CORPORATION,
Address: 3505 E. FRONTAGE ROAD - STE 175
City-St-Zip: TAMPA, FL 33607 17

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: ROBERT DAVIS

MGR

03/24/2009

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