## 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M1000000190

Entity Name: LEXISNEXIS RISK SOLUTIONS BUREAU LLC

Mar 21, 2011 Secretary of State

Date

**New Principal Place of Business: Current Principal Place of Business:** 

1000 ALDERMAND DRIVE ALPHARETTA, GA 30005

**Current Mailing Address: New Mailing Address:** 

1000 ALDERMAND DRIVE ALPHARETTA, GA 30005

FEI Number: 27-1372666 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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

**MANAGING MEMBERS/MANAGERS:** 

Name:

FOGARTY, KENNETH E

Address: 2 NEWTON PLACE THIRD FLOO 255 WASHINGTON S

NEWTON, MA 02458 City-St-Zip:

Title: MGR

Name: HORBACZEWSKI, HENRY Address: 125 PARK AVE 23RD FLOOR City-St-Zip: NEW YORK, NY 10017

Title: MGR

PECK, JAMES M Name: 1000 ALDERMAND DRIVE Address: City-St-Zip: ALPHARETTA, GA 30005

Title: MGR

Name: SIDEWATER, MEREDITH Address: 1000 ALDERMAN DRIVE City-St-Zip: ALPHARETTA, GA 30005

I hereby 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 Statues.

SIGNATURE: HENRY HORBACZEWSKI **MGR** 03/21/2011