

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 08 1998 8:00am
Secretary of State

• PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P00315 (2)
1. Corporation Name
FIRST AMERICAN REAL ESTATE INFORMATION SERVICES,
INC.



Principal Place of Business Mailing Address
150 SECOND AVENUE, N
SUITE 1600
ST. PETERSBURG FL 33701
US
150 SECOND AVENUE, N
SUITE 1600
ST. PETERSBURG FL 33701
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		12/16/1993	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		95-3881518	
24 Country		30 Country		Applied For	
				Not Applicable	
				5. Certificate of Status Desired	
				<input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible	
				Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name	see attached filed 12/17/97
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	
NAME	NALLATHAMBI, ANAND K.	1.2 NAME	
STREET ADDRESS	3570 CAMINO DEL RIO NORTH, STE 300	1.3 STREET ADDRESS	
CITY-ST-ZIP	SAN DIEGO CA	1.4 CITY-ST-ZIP	
TITLE	SDV	2.1 TITLE	
NAME	ZINDA, CRAIG	2.2 NAME	
STREET ADDRESS	150 SECOND AVENUE, NORTH, SUITE 1600	2.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	2.4 CITY-ST-ZIP	
TITLE	TVD	3.1 TITLE	
NAME	HERKENHOFF, H. JOHN	3.2 NAME	Lamson, John C.
STREET ADDRESS	150 SECOND AVENUE, NORTH, SUITE 1600	3.3 STREET ADDRESS	150 2nd Avenue North, Suite 1600
CITY-ST-ZIP	ST. PETERSBURG FL	3.4 CITY-ST-ZIP	St. Petersburg, FL 33701
TITLE	PD	4.1 TITLE	
NAME	LONG, JOHN W.	4.2 NAME	
STREET ADDRESS	150 SECOND AVENUE, NORTH, SUITE 1600	4.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	ROGERS, MARK D.	5.2 NAME	
STREET ADDRESS	5815 HIGHPOINT DRIVE, SUITE 1000	5.3 STREET ADDRESS	
CITY-ST-ZIP	IRVING TX	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or its receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

John C. Lamson May 1 1998 (813) 805 4015

CR2E034 (10/97)