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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P00315

1. Corporation Name

FIRST AMERICAN REAL ESTATE INFORMATION SERVICES. INC.

					_							
Principal Place	e of Business	Mailing Address			.							
150 SECOND AVENUE, N 150 SECOND AVENUE, N												
SUITE 1600 SUITE 1600 SUITE 1600 ST. PETERSBURG FL 33701 ST. PETERSBURG FL 33701							DO NOT WRITE IN THIS !	SPACE				
ST. PETERSBURG FL 33701 ST. PETERSBURG FL 33701 US US						3. Date Incorporated or Qualifed						
00						\ *	12/16/1983			•		
2. Principal Place of Business 2a. Mailing Address							FEI Number		Appli	ied For		
21		26				l	95-38815 <u>18</u>		Not A	Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5	Certificate of Status Desired			ditional		
22		27				J.			e Requ			
City & State	B - ^\"\"	City & State				6.	Election Campaign Financing	•	00 м	- 1		
23		28	0			- }	Trust Fund Contribution		led to	rees		
Zip	Country Zip			Country			8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No					
24	9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent								
	9. Name and Address of Cultent	Kedistalan Adelit	81	1	Name	10.	Traine and Addition of the Addition					
CORPORATION SERVICE COMPANY				⊥								
1201 HAYS STREET			82	82 Street Addre			O. Box Number is Not Acceptable)					
TALLAHASSEE FL 32301-2525			8:	3			 					
			L	\perp				11				
			84	4	City		FL	85	Zip Co	ae		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the					named corpo	ration	submits this statement for the purpose of	changin	g its re	gistered		
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.										stered		
	m ramiliar with, and accept the congati	ons of, Section our coops, Flori	ua Otaluic							-		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: I	Registered Age	ent :	signature required	when n	einstating) DATE					
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFFICERS AN	D DIRE	CTOR	S IN 12		
TITLE	V DELETE			1.1 TITLE				Cha	nge	☐ Addition		
NAME	AME NALLATHAMBI, ANAND K.			1.2 NAME						1		
STREET ADDRESS 3570 CAMINO DEL RIO NORTH, STE 300			1.3 STREE	ADDRESS					ļ			
CITY-ST-ZIP	SAN DIEGO CA		1.4 CITY-ST-ZIP									
TITLE	SDV	☐ DELETE	2.1 TITLE					Cha	nge	☐ Addition		
NAME	ZINDA, CRAIG			2.2 NAME						ł		
STREET ADDRESS	s 150 SECOND AVENUE, NORTH, SUITE 1600			REET ADDRESS						İ		
CITY-ST-ZIP	ST. PETERSBURG FL		2.4 CITY-	-ST-	·ZIP		<u> </u>					
- TITLE -	. □ DELETE			3.1 TITLE				☐ Cha	nge_	Addition		
NAME	LAMSON, JOHN C			3.2 NAME								
STREET ADDRESS	450 OFCOMO AVENUE MODELL CUITE 4000			3.3 STREET ADDRESS								
CITY-ST-ZIP	ST. PETERSBURG FL 33701		3.4, CITY-ST-ZIP		-ZIP							
TITLE	PD DELETE		4.1 TITLE	4.1 TITLE			•	Cha	inge	☐ Addition		
NAME	LONG, JOHN W.		4. 2 NAME	4. 2 NAME						Ì		
STREET ADDRESS			4.3 STREET ADDRESS		ADDRESS							
CITY-ST-ZIP	ST PETERSBURG FL		4.4 CITY-	4.4 CITY-ST-ZIP								
TITLE	D XX DELETE		5.1 TITLE	S.1 TIFLE				Cha	inge	Addition		
NAME	ROGERS, MARK D.		5.2 NAME	Ξ						ļ		
STREET ADDRESS 5615 HIGHPOINT DRIVE, SUITE 1000		1000	5.3 STREET ADDRESS		ADDRESS							
CITY-ST-ZIP	IRVING TX	·	5.4 CITY-		ZIP							
TITLE		☐ DELETE	6.1 TITLE				•	Cha	inge	☐ Addition		
NAME			6.2 NAME	:								

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 the 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

REQUICTATE J. Zinda April, 13,