AMENDED *

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #. P93000049914 -

1. Entity Name

Bankrate, Inc.

FILED
00 OCT 19 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
11811 US Highway 1 Suite 101 North Palm Beach, Florida 33408	Same

DO NOT WRITE IN THIS SPACE
10/9/00 01080 016 **61.25

2. Principal Place of Business	3. Mailing Address
11811 US Highway 1	Same
Suite, Apt. #, etc.: Suite 101	Suite, Apt. #, etc.: Same
City & State: North Palm Beach	City & State: Same
Zip: 33408 Country: USA	Zip: Same Country: Same

4. FEI Number: 65-0423422 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Anderson, William P. 11811 US Highway 1 Suite 101 North Palm Beach, FL 33408	Name: DeFranco, Robert J. Street Address (P.O. Box Number is Not Acceptable): 11811 US Highway 1 Suite 101 City: North Palm Beach FL Zip Code: 33408

8. 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: Robert J. DeFranco 10/4/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CPD Anderson, William P. 11811 US Hwy 1, Ste 101 N. Palm Beach, FL 33408 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Morse, Peter C. 200 Four Falls Corp Ctr, Ste 205 West Conshohocken, PA 19428 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SRV Campbell, Sara 11811 US Hwy 1, Ste 101 N. Palm Beach, FL 33408 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S, SRV DeFranco, Robert J. 11811 US Hwy 1, Ste 101 N. Palm Beach, FL 33408 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S, SRV Minford, Peter W. 11811 US Hwy 1, Ste 101 N. Palm Beach, FL ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D, C Cunningham, Jeffrey Two Crow Island Manchester-By-The-Sea, MA 01944 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Martin, William 609 Greenwich St, Ste 9B New York, NY 10014 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P, D DeMarse, Elisabeth 11 East 44th St, Ste 1200 New York, NY 10017 SP ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	700003419337--8 -10/09/00--01080--016 *****61.25 *****61.25 ☐ Change ☐ Addition

13. *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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert J. DeFranco 10/4/00 561-630-1230
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

(1/99)

ilife.com, Inc./OPERATING ACCOUNT

copy sent A/P 19339

VENDOR NO.: DEPTST NAME: DEPARTMENT OF STATE 19339

INVOICE	REFERENCE	INV. DATE	INV. AMOUNT	DISCOUNT	ADJ. AMT.	AMT. PAID
100400FL	65-0423422	10/04/00	61.25	0.00	0.00	61.25

spoke to VELMA on 10/16 she said the check was received.

(Acct: 101-00) Check Date 10/04/00 Total 61.25

LASER A/P CHECK 49105 REORDER FROM SBT FORMS CALL TOLL FREE 1-800-SBT-FORM FAX 1-800-258-2132 USE WITH COMPATIBLE ENVELOPE 772511 B

11811 US Highway 1
Suite 101
North Palm Beach, FL 33408

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City North Palm Beach FL Zip Code 33408

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CR2E034 (9/99)

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SIGNATURE: Robert J. DeFranco Robert J. DeFranco 10/4/00 Sal. 620-1230
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #