2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003115

Entity Name: CARFAX, INC.

Current Principal Place of Business:

5860 TRINITY PARKWAY SUITE 600

CENTREVILLE, VA 20120

Current Mailing Address:

26533 EVERGREEN ROAD ATTN: TAX DEPARTMENT SUITE 900

SOUTHFIELD, MI 48076 US

FEI Number: 25-1465303 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM % CT CORPORTION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

FILED Apr 17, 2013

Secretary of State

CC6651635088

Officer/Director Detail:

Title Title **ASAT**

Name RAINES, RICHARD T Name LUU, LAN

5860 TRINITY PARKWAY, SUITE 600 5860 TRINITY PARKWAY, SUITE 600 Address Address

CENTREVILLE VA 20120 City-State-Zip: CENTREVILLE VA 20120 City-State-Zip:

Title T/D Title

Name POLK, STEPHEN R GOFF, MICHELLE Name

Address 26533 EVERGREEN ROAD, SUITE 900 Address 26533 EVERGREEN ROAD, SUITE 900

City-State-Zip: SOUTHFIELD MI 48076 City-State-Zip: SOUTHFIELD MI 48076

Title S Title AS

Name BLUMENTHAL, STEVE SIMMS, MELANIE Name

26533 EVERGREEN ROAD, SUITE 900 Address 5860 TRINITY PARKWAY, SUITE 600 Address

CENTREVILLE VA 20120 City-State-Zip:

City-State-Zip: SOUTHFIELD MI 48076

Title DIRECTOR

Name BARRETT, PATRICK

Address 26533 EVERGREEN ROAD

SUITE 900

City-State-Zip: SOUTHFIELD MI 48076

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

04/17/2013 SIGNATURE: MELANIE SIMMS SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date