

1.) CORPORATION NAME:

CARFAX, INC.

DUE DATE: **10/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060**

SCC ID NO: **F1155201**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

PA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5860 TRINITY PARKWAY ST-600

CITY/ST/ZIP: CENTREVILLE, VA 20120

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

<p>NAME: RICHARD RAINES TITLE: PRESIDENT ADDRESS: 5860 TRINITY PKWY ST-600 CITY/ST/ZIP/CO: CENTREVILLE, VA 20120</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: MELANIE SIMMS TITLE: SECRETARY ADDRESS: 26533 EVERGREEN ROAD SUITE 900 CITY/ST/ZIP/CO: SOUTHFIELD, MI 48076</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: STEVE BLUMENTHAL TITLE: ASST SECRETARY ADDRESS: 5860 TRINITY PKWY ST-600 CITY/ST/ZIP/CO: CENTREVILLE, VA 20120</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: LAN LUU TITLE: ASST TREASURER ADDRESS: 5860 TRINITY PKWY ST-600 CITY/ST/ZIP/CO: CENTREVILLE, VA 20120</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: MICHELLE GOFF TITLE: TREASURER ADDRESS: 26533 EVERGREEN ROAD SUITE 900 CITY/ST/ZIP/CO: SOUTHFIELD, MI 48076</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: STEPHEN R POLK TITLE: DIRECTOR ADDRESS: 26533 EVERGREEN ROAD SUITE 900 CITY/ST/ZIP/CO: SOUTHFIELD, MI 48076</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	PATRICK BARRETT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	26533 EVERGREEN ROAD		
CITY/ST/ZIP/CO:	SUITE 900 SOUTHFIELD, MI 48076		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ MELANIE SIMMS	MELANIE SIMMS, SECRETARY	10/9/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.