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| SCC eFile | 2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION | 212532017 |
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| 1.) CORPORATION NAME: LexisNexis VitalChek Network 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: F1230962 | | | | | | |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY | 5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">CLASS</th> <th style="width:50%;">AUTHORIZED</th> </tr> <tr> <td>COMV</td> <td>2,000</td> </tr> <tr> <td>COMNV</td> <td>38,000</td> </tr> </table> | CLASS | AUTHORIZED | COMV | 2,000 | COMNV | 38,000 |
| CLASS | AUTHORIZED | | | | | | |
| COMV | 2,000 | | | | | | |
| COMNV | 38,000 | | | | | | |
| 4.) STATE OR COUNTRY OF INCORPORATION: TN | | | | | | | |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1000 ALDERMAN DR

CITY/ST/ZIP: ALPHARETTA, GA 30005

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.

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| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: JAMES PECK TITLE: PRESIDENT ADDRESS: 1000 ALDERMAN DR CITY/ST/ZIP/CO: ALPHARETTA, GA 30005 | | |

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| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: KENNETH FOGARTY TITLE: VP/T ADDRESS: 2 NEWTON PL STE 350 CITY/ST/ZIP/CO: NEWTON, MA 02458 | | |

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| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: REBECCA SCHMITT TITLE: VICE PRESIDENT ADDRESS: 1000 ALDERMAN DR CITY/ST/ZIP/CO: ALPHARETTA, GA 30005 | | |

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| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: RENEE SIMONTON TITLE: VICE PRESIDENT ADDRESS: 1105 NORTH MARKET ST STE 501 WILMINGTON, DE 19801 | | |

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| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: Meredith Sidewater TITLE: SECRETARY ADDRESS: 1000 ALDERMAN DR CITY/ST/ZIP/CO: ALPHARETTA, GA 30005 | | |

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.

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| /s/ RENEE SIMONTON | RENEE SIMONTON, VICE PRESIDENT | 8/22/2012 |
| 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.