



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 000163928		2. Exact name of the Corporation PROPERTYINFO CORPORATION		
3. Principal office address 1980 POST OAK BLVD STE 500		City HOUSTON	State TX	Zip 77056
4. Business Phone No. 713-985-1131		5. State of Incorporation TEXAS		
6. Brief description of the character of business conducted in Rhode Island ASP/DATA SERVICES				
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
President Name PATRICK VADEN		Vice-President Name JENNIFER DUMAS		
Street Address 1980 POST OAK BLVD STE 500		Street Address 1980 POST OAK BLVD STE 500		
City HOUSTON	State TX	Zip 77056	City HOUSTON	State TX
Secretary Name STEVEN SOFFER		Treasurer Name MARCUS RODRIGUEZ		
Street Address 1980 POST OAK BLVD STE 710		Street Address 1980 POST OAK BLVD STE 1010		
City HOUSTON	State TX	Zip 77056	City HOUSTON	State TX
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
Director Name PATRICK VADEN		Director Name STEWART MORRIS JR		
Street Address 1980 POST OAK BLVD STE 500		Street Address 1980 POST OAK BLVD STE 800		
City HOUSTON	State TX	Zip 77056	City HOUSTON	State TX
Director Name GLENN CLEMENTS		Director Name JASON NADEAU		
Street Address 1980 POST OAK BLVD STE 1400		Street Address 9700 BISSONNET STE 1500		
City HOUSTON	State TX	Zip 77056	City HOUSTON	State TX
9. SHARES AUTHORIZED		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
		10000	COMMON	0.00

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 SECRETARY OF STATE
 CORPORATIONS DIV
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This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

FEB 16 2012

By 1163736

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Authorized Representative

02/14/2012

Date

MARCUS RODRIGUEZ
 Print or Type Name of Authorized Representative