

1.) CORPORATION NAME:

DUE DATE: **2/28/2013**

MapQuest, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1182148**

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1555 BLAKE STREET
3RD FLOOR

CITY/ST/ZIP: DENVER, CO 80202

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.

NAME:	Francis Lobo	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/DIR		
ADDRESS:	770 BROADWAY 4TH FLOOR		
CITY/ST/ZIP/CO:	NEW YORK, NY 10003		

NAME:	TIFFANY HERRICK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1555 BLAKE STREET		
CITY/ST/ZIP/CO:	3RD FLOOR DENVER, CO 80202		

NAME:	JULIE JACOBS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/SECRETARY		
ADDRESS:	22000 AOL WAY		
CITY/ST/ZIP/CO:	DULLES, VA 20166		

NAME:	ARTHUR MINSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/ASST TREAS		
ADDRESS:	770 BROADWAY 4TH FL		
CITY/ST/ZIP/CO:	NEW YORK, NY 10003		

NAME:	MICHAEL HOWSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	22000 AOL WAY		
CITY/ST/ZIP/CO:	DULLES, VA 20166		

NAME:	Michael E. NOLAN, JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	770 BROADWAY, 4TH FLOOR		
CITY/ST/ZIP/CO:	NEW YORK, NY 10003		

NAME: Matthew Kelpy TITLE: VP/Contr/Treas ADDRESS: 22000 AOL Way CITY/ST/ZIP/CO: Dulles, VA 20166	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: Brian McMahon TITLE: VICE PRESIDENT ADDRESS: 22000 AOL Way CITY/ST/ZIP/CO: Dulles, VA 20166	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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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/ MICHAEL HOWSON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MICHAEL HOWSON, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	2/28/2013 DATE
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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.