

1.) CORPORATION NAME:

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

CBS Outdoor Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1699125**

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: C/O ADRIENNE HARRINGTON
51 W 52ND STREET (19-13)

CITY/ST/ZIP: NEW YORK, NY 10019

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:	WALLY C KELLY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT CEO		
ADDRESS:	405 LEXINGTON AVE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10174		

NAME:	DAVID H. POSY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	405 LEXINGTON AVENUE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10174		

NAME:	MICHAEL A KOCZKO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	51 W 52ND STREET		
CITY/ST/ZIP/CO:	NEW YORK, NY 10019		

NAME:	RICHARD SAUER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP/GC/AS		
ADDRESS:	405 LEXINGTON AVENUE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10174		

NAME:	THEODORE G. SIRY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP/CONTROLR/AS		
ADDRESS:	405 LEXINGTON AVENUE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10174		

NAME:	ERIC J. SOBCZAK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	20 STANWIX STREET		
CITY/ST/ZIP/CO:	PITTSBURGH, PA 15222		

NAME: LISA M. TANZI TITLE: ASST SECRETARY ADDRESS: 51 W 52ND STREET CITY/ST/ZIP/CO: NEW YORK, NY 10019	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: J. KENNETH HILL TITLE: TREASURER ADDRESS: 51 W 52ND STREET CITY/ST/ZIP/CO: NEW YORK, NY 10019	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: LOUIS J BRISKMAN TITLE: EVP SECRETARY ADDRESS: 51 WEST 52ND STREET CITY/ST/ZIP/CO: NEW YORK, NY 10019	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: RAYMOND NOWAK TITLE: EVP CFO ADDRESS: 405 LEXINGTON AVE CITY/ST/ZIP/CO: NEW YORK, NY 10174	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
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/ ERIC J. SOBCZAK _____ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ERIC J. SOBCZAK, ASST SECRETARY _____ PRINTED NAME AND CORPORATE TITLE	12/13/2012 _____ 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.		