

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213526673

1.) CORPORATION NAME:

STS Program Management, Inc.

DUE DATE: **7/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD
SUITE 301**

SCC ID NO: **F1759010**

5.) STOCK INFORMATION

CLASS AUTHORIZED

GLEN ALLEN, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NY

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE BLUE HILL PLAZA, STE 1686

CITY/ST/ZIP: PEARL RIVER, NY 10965

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: CATHY L MCKEON
TITLE: CEO
ADDRESS: ONE BLUE HILL PLAZA, STE 1686
CITY/ST/ZIP/CO: PEARL RIVER, NY 10965

OFFICER DIRECTOR

NAME: THOMAS DIMARINO
TITLE: PRES/TREA
ADDRESS: ONE BLUE HILL PLAZA, STE 1686
CITY/ST/ZIP/CO: PEARL RIVER, NY 10965

OFFICER DIRECTOR

NAME: ROBERT MCKEON
TITLE: CHAIRMAN
ADDRESS: ONE BLUE HILL PLAZA, STE 1686
CITY/ST/ZIP/CO: PEARL RIVER, NY 10965

OFFICER DIRECTOR

NAME: DAVID PATERSON
TITLE: EVP/GEN COUN
ADDRESS: ONE BLUE HILL PLAZA, STE 1686
CITY/ST/ZIP/CO: PEARL RIVER, NY 10965

OFFICER DIRECTOR

NAME: NOREEN SCIACCHETANO
TITLE: SVP/SEC
ADDRESS: ONE BLUE HILL PLAZA, STE 1686
CITY/ST/ZIP/CO: PEARL RIVER, NY 10965

OFFICER 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/ THOMAS DIMARINO

THOMAS DIMARINO, PRES/TREA

6/6/2013

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.