

SCC eFile

2015 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

215523525

1.) CORPORATION NAME:

STS Program Management, Inc.

DUE DATE: **7/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1759010**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	200

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

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

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

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

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

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	6/19/2015
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.