

1.) CORPORATION NAME:

**RESONATE NETWORKS, INC.**

DUE DATE: **1/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY**

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

SCC ID NO: **F1814443**

**RICHMOND, VA 23219**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	20,000,000
PREFER	6,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11720 PLAZA AMERICA DRIVE  
3RD FLOOR

CITY/ST/ZIP: RESTON, VA 20190

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:	BRYAN GERNERT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	P/CEO		
ADDRESS:	11720 PLAZA AMERICA DRIVE		
	3RD FLOOR		
CITY/ST/ZIP/CO:	RESTON, VA 20190		

NAME:	ANDREAS HUNN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SEC/COO		
ADDRESS:	11720 PLAZA AMERICA DRIVE		
	3RD FLOOR		
CITY/ST/ZIP/CO:	RESTON, VA 20190		

NAME:	DAVID WHEATLEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	11720 PLAZA AMERICA DRIVE		
	3RD FLOOR		
CITY/ST/ZIP/CO:	RESTON, VA 20190		

NAME:	DAVID BELL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11720 PLAZA AMERICA DRIVE		
	3RD FLOOR		
CITY/ST/ZIP/CO:	RESTON, VA 20190		

NAME:	JOHN D BRADY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	11720 PLAZA AMERICA DRIVE		
	3RD FLOOR		
CITY/ST/ZIP/CO:	RESTON, VA 20190		

NAME: SARA FAGEN TITLE: VICE CHAIRMAN ADDRESS: 11720 PLAZA AMERICA DRIVE 3RD FLOOR CITY/ST/ZIP/CO: RESTON, VA 20190	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: IAN SIGALOW TITLE: DIRECTOR ADDRESS: 11720 PLAZA AMERICA DRIVE 3RD FLOOR CITY/ST/ZIP/CO: RESTON, VA 20190	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Lynda Clarizio TITLE: DIRECTOR ADDRESS: 11720 Plaza America Drive 3rd Floor CITY/ST/ZIP/CO: Reston, VA 20190	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Ted Leonsis TITLE: DIRECTOR ADDRESS: 11720 Plaza America Drive 3rd Floor CITY/ST/ZIP/CO: Reston, VA 20190	<input type="checkbox"/> OFFICER	<input checked="" 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/ DAVID WHEATLEY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DAVID WHEATLEY, CFO PRINTED NAME AND CORPORATE TITLE	1/31/2013 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.		