

1.) CORPORATION NAME:

DriveCam, Inc.

DUE DATE: **4/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1821125**

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	75,000,000
PREFC	5,654,281
PREFA	2,386,125

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8911 BALBOA AVE SUITE 200

CITY/ST/ZIP: SAN DIEGO, CA 92123

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:	WILLIAM RUFF	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	8911 BALBOA AVE SUITE 200		
CITY/ST/ZIP/CO:	SAN DIEGO, CA 92123		

NAME:	BRANDON NIXON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	8911 BALBOA AVE SUITE 200		
CITY/ST/ZIP/CO:	SAN DIEGO, CA 92123		

NAME:	DOUG CARLISLE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3000 SAND HILL RD		
CITY/ST/ZIP/CO:	BLDG 4 STE 900 MENLO PARK, CA 94025		

NAME:	JUSTIN JASHKE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5616 SO IVY COURT		
CITY/ST/ZIP/CO:	GREENWOOD VILLAGE, CO 80111		

NAME:	GARI CHEEVER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	11682 EL CAMINO REAL		
CITY/ST/ZIP/CO:	SAN DIEGO, CA 92130		

NAME:	MIKE MORGAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	590 FOREST AVENUE		
CITY/ST/ZIP/CO:	PALO ALTO, CA 93921		

NAME: MIKE DONOVAN TITLE: DIRECTOR ADDRESS: 320 PARK AVENUE 25TH FLR CITY/ST/ZIP/CO: NEW YORK, NY 10022	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: PETER ARROWSMITH TITLE: DIRECTOR ADDRESS: 12680 HIGH BLUFF DRIVE STE 200 CITY/ST/ZIP/CO: SAN DIEGO, CA 92130	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: TOM LAFLEUR TITLE: DIRECTOR ADDRESS: BOX 3029 RANCH SANTA FE FARMS ROAD RANCHO SANTA FE, CA 92067	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: LARRY HANDEN TITLE: DIRECTOR ADDRESS: 680 5TH AVENUE., 8TH FLR CITY/ST/ZIP/CO: NEW YORK, NY 10019	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: JOHN CLARK TITLE: DIRECTOR ADDRESS: 320 PARK AVENUE 25TH FLR CITY/ST/ZIP/CO: NEW YORK, NY 10022	<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/ WILLIAM RUFF	WILLIAM RUFF, CFO	4/27/2012
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.		