

SCC eFile
(6/10)

2011 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

211514026

1.) CORPORATION NAME:

Patch Media Corporation

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CORPORATION SERVICE COMPANY

Bank of America Center, 16th Floor

1111 East Main Street

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

DUE DATE: **6/30/2011**

SCC ID NO: **F1829243**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 584 BROADWAY, SUITE 808

CITY/ST/ZIP: NEW YORK, NY 10012-

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: JONATHAN BROD
TITLE: PRESIDENT
ADDRESS: 770 BROADWAY 4TH FLOOR
CITY/ST/ZIP/CO: NEW YORK, NY 10003-

OFFICER

DIRECTOR

NAME: ARTHUR MINSON
TITLE: VP, Asst TREA
ADDRESS: 770 BROADWAY, 4TH FLOOR
CITY/ST/ZIP/CO: NEW YORK, NY 10003-

OFFICER

DIRECTOR

NAME: WARREN WEBSTER
TITLE: PRESIDENT
ADDRESS: 584 BROADWAY SUITE 808
CITY/ST/ZIP/CO: NEW YORK, NY 10012-

OFFICER

DIRECTOR

NAME: JULIE JACOBS
TITLE: VP, SECRETARY
ADDRESS: 22000 AOL WAY
CITY/ST/ZIP/CO: DULLES, VA 20166-

OFFICER

DIRECTOR

NAME: J. MICHAEL SUFFREDINI
TITLE: TREASURER
ADDRESS: 22000 AOL WAY
CITY/ST/ZIP/CO: DULLES, VA 20166-

OFFICER

DIRECTOR

NAME: CHARLIE GRAY TITLE: VICE PRESIDENT ADDRESS: 584 BROADWAY, SUITE 808 CITY/ST/ZIP/CO: NEW YORK, NY 10012-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: JOHN RUCKER TITLE: VICE PRESIDENT ADDRESS: 584 BROADWAY, SUITE 808 CITY/ST/ZIP/CO: NEW YORK, NY 10012-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: MICHAEL E. NOLAN, JR. TITLE: DIRECTOR ADDRESS: 770 BRODWAY, 4TH FLOOR CITY/ST/ZIP/CO: NEW YORK, NY 10003-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: MICHAEL HOWSON TITLE: ASST SECRETARY ADDRESS: 22000 AOL WAY CITY/ST/ZIP/CO: DULLES, VA 20166-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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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/ MICHAEL HOWSON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MICHAEL HOWSON, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	6/29/2011 DATE
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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.