

SCC eFile

**2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

213530294

1.) CORPORATION NAME:

**Patch Media Corporation**

DUE DATE: **6/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY**

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

SCC ID NO: **F1829243**

5.) STOCK INFORMATION

CLASS  AUTHORIZED

**RICHMOND, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 675 AVENUE OF THE AMERICAS, 3RD FLOOR

CITY/ST/ZIP: NEW YORK, NY 10010

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: WARREN WEBSTER  
TITLE: VICE PRESIDENT  
ADDRESS: 675 AVENUE OF THE AMERICAS, 3RD FLOOR  
CITY/ST/ZIP/CO: NEW YORK, NY 10010

OFFICER  DIRECTOR

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

OFFICER  DIRECTOR

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

OFFICER  DIRECTOR

NAME: Karen Dykstra  
TITLE: VP, ASST TREA  
ADDRESS: 770 BROADWAY, 4TH FLOOR  
CITY/ST/ZIP/CO: NEW YORK, NY 10003

OFFICER  DIRECTOR

NAME: Melanie Pereira  
TITLE: VICE PRESIDENT  
ADDRESS: 675 AVENUE OF THE AMERICAS, 3RD FLOOR  
CITY/ST/ZIP/CO: NEW YORK, NY 10010

OFFICER  DIRECTOR

NAME: Matthew Kelpy  
TITLE: TREASURER  
ADDRESS: 22000 AOL WAY  
CITY/ST/ZIP/CO: DULLES, VA 20166

OFFICER  DIRECTOR

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	
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	
NAME: Matthew Garber TITLE: DIRECTOR ADDRESS: 22000 AOL Way CITY/ST/ZIP/CO: Dulles, VA 20166	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: Steven Kalin TITLE: PRESIDENT ADDRESS: 675 Avenue of the Americas, 3rd Floor CITY/ST/ZIP/CO: New York, NY 10003	<input checked="" type="checkbox"/> OFFICER <input 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/ MICHAEL HOWSON _____ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MICHAEL HOWSON, ASST SECRETARY _____ PRINTED NAME AND CORPORATE TITLE	6/27/2013 _____ 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.		