

1.) CORPORATION NAME: Qumu Corporation	DUE DATE: 1/31/2016				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 285 GLEN ALLEN, VA	SCC ID NO: F1950338				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>CAP</td> <td>30,000,000</td> </tr> </table>	CLASS	AUTHORIZED	CAP	30,000,000
CLASS	AUTHORIZED				
CAP	30,000,000				
4.) STATE OR COUNTRY OF INCORPORATION: MN					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 510 1ST AVENUE NORTH
STE 305

CITY/ST/ZIP: MINNEAPOLIS, MN 55403

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: SHERMAN L BLACK TITLE: PRESIDENT ADDRESS: 510 1ST AVENUE NORTH STE 305 CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55403		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: PETER GOEPFRICH TITLE: TREASURER ADDRESS: 510 1ST AVE NORTH STE 305 CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55403		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: THOMAS F MADISON TITLE: DIRECTOR ADDRESS: 510 1ST AVENUE N STE 305 CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55403		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KIMBERLY K NELSON TITLE: DIRECTOR ADDRESS: 510 1ST AVE NORTH STE 305 CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55403		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ROBERT F OLSON TITLE: DIRECTOR ADDRESS: 510 1ST AVENUE NORTH STE 305 CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55403		

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/ PETER GOEPFRICH	PETER GOEPFRICH, TREASURER	1/29/2016
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.		