

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 18, 2007 8:00 am**  
**Secretary of State**

04-18-2007 90178 039 \*\*\*150.00

DOCUMENT # F05000002269

1. Entity Name

RIGHT MEDIA INC.



Principal Place of Business

212 FIFTH AVE  
8TH FLOOR  
NEW YORK NY 10010

Mailing Address

212 FIFTH AVE  
8TH FLOOR  
NEW YORK NY 10010



2. Principal Place of Business - No P.O. Box #

2 Park Avenue

3. Mailing Address

2 Park Avenue

Suite, Apt. #, etc.

Suite 450

Suite, Apt. #, etc.

Suite 450

City & State

New York, NY

City & State

New York, NY

Zip

10016

Country

USA

Zip

10016

Country

USA

1st MOORE

CR2E034 (10/06)

4. FEI Number

20-2074029

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2007 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME WALRATH, MICHAEL ☐ Delete  
STREET ADDRESS 276 5TH AVENUE, STE. 605  
CITY-ST-ZIP NEW YORK NY 10001

TITLE STCO  
NAME HUNSICKER, CHRISTINE ☐ Delete  
STREET ADDRESS 212 FIFTH AVE 8TH FLOOR  
CITY-ST-ZIP NEW YORK NY 10010

TITLE CTO  
NAME O'KELLY, BRYAN ☒ Delete  
STREET ADDRESS 212 FIFTH AVE 8TH FLOOR  
CITY-ST-ZIP NEW YORK NY 10010

TITLE D  
NAME GOODHART, NOAH ☒ Delete  
STREET ADDRESS 212 FIFTH AVE 8TH FLOOR  
CITY-ST-ZIP NEW YORK NY 10010

TITLE CFO  
NAME ROBERTS, JOHN ☐ Delete  
STREET ADDRESS 212 FIFTH AVE 8TH FLOOR  
CITY-ST-ZIP NEW YORK NY 10010

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Chief Executive Officer ☒ Change ☐ Addition  
NAME Walrath, Michael  
STREET ADDRESS 2 Park Ave, Suite 450  
CITY-ST-ZIP New York, NY 10016

TITLE ☒ Change ☐ Addition  
NAME Hunsicker, Christine  
STREET ADDRESS 2 Park Avenue, Suite 450  
CITY-ST-ZIP New York, NY 10016

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Chief Financial Officer ☒ Change ☐ Addition  
NAME Roberts, John  
STREET ADDRESS 2 Park Avenue, Suite 450  
CITY-ST-ZIP New York, NY 10016

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*John Roberts*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/07  
Date

212-710-3606  
Daytime Phone