

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000003221

**Entity Name:** PORTFOLIO MEDIA, INC.

**Current Principal Place of Business:**

230 PARK AVE  
NEW YORK, NY 10169

**Current Mailing Address:**

1105 NORTH MARKET ST  
SUITE 501  
WILMINGTON, DE 19801 US

**FEI Number:** 84-1660943

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TD  
Name FOGARTY, KENNETH E  
Address 313 WASHINGTON ST  
City-State-Zip: NEWTON MA 19801

Title S  
Name MCDOUGALL, IAN  
Address 230 PARK AVE  
City-State-Zip: NEW YORK NY 10169

Title D  
Name GOLDWEITZ, JULIE A  
Address 230 PARK AVE  
City-State-Zip: NEW YORK NY 10169

Title D  
Name THOMPSON, KENNETH  
Address 9443 SPRINGBORO PIKE  
City-State-Zip: MIAMISBURG OH 45342

Title PRESIDENT, DIRECTOR  
Name WALSH, MICHAEL  
Address 230 PARK AVE  
City-State-Zip: NEW YORK NY 10169

Title ASST. TREASURER  
Name HORGAN, MARY ANN  
Address 313 WASHINGTON ST  
City-State-Zip: NEWTON MA 02458

Title VP  
Name FROMMER, CREIGHTON  
Address 1000 ALDERMAN  
City-State-Zip: ALPHARETTA GA 30005

Title VP  
Name SIMONTON, RENEE  
Address 1105 NORTH MARKET  
City-State-Zip: WILMINGTON DE 19801

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*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** RENEE SIMONTON

VICE PRESIDENT

02/05/2019

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title VP  
Name DANGOIA, PETER  
Address 313 WASHINGTON  
City-State-Zip: NEWTON MA 02458