

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006474

Entity Name: VIAMEDIA, INC.

FILED
Apr 07, 2022
Secretary of State
7454190491CC

Current Principal Place of Business:

220 LEXINGTON GREEN CIRCLE
SUITE 300
LEXINGTON, KY 40503

Current Mailing Address:

220 LEXINGTON GREEN CIRCLE
SUITE 300
LEXINGTON, KY 40503 US

FEI Number: 23-3094448

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 PRESIDENT, DIRECTOR
Name LEIBERMAN, MARK
Address 220 LEXINGTON GREEN CIRCLE
 SUITE 300
City-State-Zip: LEXINGTON KY 40503

Title SECRETARY
Name LYKES, RANDY
Address 220 LEXINGTON GREEN CIRCLE
 SUITE 300
City-State-Zip: LEXINGTON KY 40503

Title TREASURER
Name CONNOLLY, FRANK
Address 220 LEXINGTON GREEN CIRCLE
 SUITE 300
City-State-Zip: LEXINGTON KY 40503

Title DIRECTOR
Name RESCHO, DOUGLAS C
Address 220 LEXINGTON GREEN CIRCLE
 SUITE 300
City-State-Zip: LEXINGTON KY 40503

Title DIRECTOR
Name CARTER, JEFFREY B
Address 220 LEXINGTON GREEN CIRCLE
 SUITE 300
City-State-Zip: LEXINGTON KY 40503

Title DIRECTOR
Name YOVOVICH, PAUL
Address 220 LEXINGTON GREEN CIRCLE
 SUITE 300
City-State-Zip: LEXINGTON KY 40503

Title DIRECTOR
Name GRAUNKE, TERENCE M
Address 220 LEXINGTON GREEN CIRCLE
 SUITE 300
City-State-Zip: LEXINGTON KY 40503

Title DIRECTOR
Name SOLOMON, DAVID
Address 220 LEXINGTON GREEN CIRCLE
 SUITE 300
City-State-Zip: LEXINGTON KY 40503

Continues on page 2

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: FRANK CONNOLLY

AUTHORIZED PERSON

04/07/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SAVCHAK, JOHN
Address 220 LEXINGTON GREEN CIRCLE
 SUITE 300
City-State-Zip: LEXINGTON KY 40503