

1.) CORPORATION NAME:

CARDINAL BANK

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER
ALICE P FRAZIER
8270 GREENSBORO DR STE 500
MCLEAN, VA 22102**

DUE DATE: **11/30/2010**

SCC ID NO: **06268775**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8270 GREENSBORO DRIVE
STE 500

CITY/ST/ZIP: MCLEAN, VA 22102-

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:	BERNARD H CLINEBURG	
TITLE:	CHRMN/PRES/CEO	
ADDRESS:	8270 GREENSBORO DRIVE STE 500	
CITY/ST/ZIP/CO:	MCLEAN, VA 22102-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MARK A WENDEL	
TITLE:	EVP/CFO	
ADDRESS:	8270 GREENSBORO DRIVE STE 500	
CITY/ST/ZIP/CO:	MCLEAN, VA 22102-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	BUDDY G BECK	
TITLE:	DIRECTOR	
ADDRESS:	8270 GREENSBORO DR STE 500	
CITY/ST/ZIP/CO:	MCLEAN, VA 22102-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	WILLIAM G BUCK	
TITLE:	DIRECTOR	
ADDRESS:	8270 GREENSBORO DR STE 500	
CITY/ST/ZIP/CO:	MCLEAN, VA 22102-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JENNIFER L DEACON	
TITLE:	SECRETARY	
ADDRESS:	8270 GREENSBORO DRIVE SUITE 500	
CITY/ST/ZIP/CO:	MCLEAN, VA 22102-	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALICE P FRAZIER EVP, COO 8270 GREENSBORO DRIVE SUITE 500 MCLEAN, VA 22102-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTOPHER W BERGSTROM PRESIDENT 8270 GREENSBORO DRIVE SUITE 500 MCLEAN, VA 22102-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SIDNEY O DEWBERRY DIRECTOR 8270 GREENSBORO DRIVE SUITE 500 MCLEAN, VA 22102-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL A GARCIA DIRECTOR 8270 GREENSBORO DRIVE SUITE 500 MCLEAN, VA 22102-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	J. HAMILTON LAMBERT DIRECTOR 8270 GREENSBORO DRIVE SUITE 500 MCLEAN, VA 22102-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALAN G MERTEN DIRECTOR 8270 GREENSBORO DRIVE SUITE 500 MCLEAN, VA 22102-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM E PETERSON DIRECTOR 8270 GREENSBORO DRIVE SUITE 500 MCLEAN, VA 22102-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES D RUSSO DIRECTOR 8270 GREENSBORO DRIVE SUITE 500 MCLEAN, VA 22102-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GEORGE P SHAFRAN DIRECTOR 8270 GREENSBORO DRIVE SUITE 500 MCLEAN, VA 22102-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: ALICE M STARR TITLE: DIRECTOR ADDRESS: 8270 GREENSBORO DRIVE SUITE 500 CITY/ST/ZIP/CO: MCLEAN, VA 22102-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
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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/ JENNIFER L DEACON	JENNIFER L DEACON,	11/10/2010
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY 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.