

1.) CORPORATION NAME:

DUE DATE: **11/30/2014**

CARDINAL BANK

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **06268775**

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

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 MCLEAN, VA 22102	
CITY/ST/ZIP/CO:		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	CHRISTOPHER W BERGSTROM	
TITLE:	PRESIDENT	
ADDRESS:	8270 GREENSBORO DRIVE SUITE 500 MCLEAN, VA 22102	
CITY/ST/ZIP/CO:		

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

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ALICE P FRAZIER	
TITLE:	EVP, COO	
ADDRESS:	8270 GREENSBORO DRIVE SUITE 500 MCLEAN, VA 22102	
CITY/ST/ZIP/CO:		

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

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BUDDY G BECK DIRECTOR 8270 GREENSBORO DR STE 500 MCLEAN, VA 22102	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM G BUCK DIRECTOR 8270 GREENSBORO DR STE 500 MCLEAN, VA 22102	<input type="checkbox"/> OFFICER	<input checked="" 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:	WILLIAM NASSETTA 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:	GEORGE P SHAFRAN 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:	ALICE M STARR 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:	STEVEN WILTSE DIRECTOR 8270 GREENSBORO DRIVE SUITE 500 MCLEAN, VA 22102	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

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.

<u>/s/ JENNIFER L DEACON</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>JENNIFER L DEACON, SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>12/3/2014</u> DATE
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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.