

SCC eFile
(6/10)

**2011 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

211515387

1.) CORPORATION NAME:

AMERICAN BANKERS ASSOCIATION

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CORPORATION SERVICE COMPANY

Bank of America Center, 16th Floor

1111 East Main Street

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DC

DUE DATE: **7/31/2011**

SCC ID NO: **F1387846**

5.) STOCK INFORMATION

CLASS

AUTHORIZED

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1120 CONN AVE NW

CITY/ST/ZIP: WASHINGTON, DC 20036-

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.

NAME: FRANCIS A. KEATING
TITLE: PRESIDENT
ADDRESS: 1120 CONNECTICUT AVE, NW
CITY/ST/ZIP/CO: WASHINGTON, DC 20036-

OFFICER

DIRECTOR

NAME: STEPHEN G. CROWE
TITLE: TREASURER
ADDRESS: 93 MAIN STREET
CITY/ST/ZIP/CO: NORTH ADAMS, MA 01247-

OFFICER

DIRECTOR

NAME: MATHEW H. STREET
TITLE: SECRETARY
ADDRESS: 1120 CONNECTICUT AVE, NW
CITY/ST/ZIP/CO: WASHINGTON, DC 20036-

OFFICER

DIRECTOR

NAME: G. WILLIAM BEALE
TITLE: DIRECTOR
ADDRESS: 24010 PARTNERSHIP BLVD
CITY/ST/ZIP/CO: RUTHER GLEN, VA 22546-

OFFICER

DIRECTOR

NAME: NORMAN E. BEATTY
TITLE: DIRECTOR
ADDRESS: 1301 HOPE BRIDGEVILLE RD
CITY/ST/ZIP/CO: HOPE, NJ 07844-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	R. DANIEL BLANTON DIRECTOR 3530 WHEELER RD AUGUSTA, GA 30909-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CRAIG BLUNDEN DIRECTOR 3756 CENTRAL AVE RIVERSIDE, CA 92506-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DOROTHY J. BRIDGES DIRECTOR 1432 U STREET NW WASHINGTON, DC 20009-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEPHEN G. CROWE DIRECTOR MOUNTAINONE FINANCIAL PARTNERS, MHC PO BOX 997 NORTH ADAMS, MA 01247-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM M. DANA DIRECTOR 2301 INDEPENDENCE AVE KANSAS CITY, MO 64124-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH R. FICALORA DIRECTOR 615 MERRICK AVE WESTBURY, NY 11590-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN A. IKARD DIRECTOR 12345 WEST COLFAX AVE LAKEWOOD, CO 80215-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL G. WILLSON DIRECTOR CITIZENS NATIONAL BANK PO BOX 220 ATHENS, TN 37371-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CRAIG MEADER DIRECTOR 305 PEARSON AVE WAVERLY, KS 66871-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL E. NOLAN DIRECTOR FIFTH DISTRICT SAVINGS BANK PO BOX 6326 NEW ORLEANS, LA 70174-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

OFFICER DIRECTOR

NAME: ROBERT P. OELER
TITLE: DIRECTOR
ADDRESS: THREE GATEWAY CENTER, 9-WEST
 401 LIBERTY AVE
CITY/ST/ZIP/CO: PITTSBURGH, PA 15222-

OFFICER DIRECTOR

NAME: SHEILA SCHAUER MATHEWS
TITLE: DIRECTOR
ADDRESS: 500 WEST MAIN
 STE 101
CITY/ST/ZIP/CO: FARMINGTON, NM 87401-

OFFICER DIRECTOR

NAME: LAURA S. SCHULTE
TITLE: DIRECTOR
ADDRESS: 301 SOUTH COLLEGE STREET
CITY/ST/ZIP/CO: CHARLOTTE, NC 28202-

OFFICER DIRECTOR

NAME: HUEY L. TOWNSEND
TITLE: DIRECTOR
ADDRESS: 217 CHURCH STREET
CITY/ST/ZIP/CO: BELZONI, MS 39038-

OFFICER DIRECTOR

NAME: STEVEN B. WIGGS
TITLE: DIRECTOR
ADDRESS: 220 WEST 2ND STREET
CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101-

OFFICER DIRECTOR

NAME: J. SCOTT WILFONG
TITLE: DIRECTOR
ADDRESS: 1445 NEW YORK AVE, NW
CITY/ST/ZIP/CO: WASHINGTON, DC 20005-

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/ MATHEW H. STREET</u>	<u>MATHEW H. STREET,</u>	<u>7/15/2011</u>
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.