

1.) CORPORATION NAME:

**CONGRESSIONAL BANK**

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**TRAC - THE REGISTERED AGENT COMPANY  
201 N. UNION STREET SUITE 140  
ALEXANDRIA, VA**

SCC ID NO: **F1637976**

5.) STOCK INFORMATION

| CLASS  | AUTHORIZED |
|--------|------------|
| COMMON | 5,000,000  |
| PREFER | 5,000,000  |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ALEXANDRIA CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MD**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 6500 ROCK SPRING DRIVE  
STE 300

CITY/ST/ZIP: BETHESDA, MD 20817

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:           | JEFFREY A LIPSON                    | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE:          | PRESIDENT & CEO                     |   |                                   |
| ADDRESS:        | 6500 ROCK SPRING DRIVE<br>SUITE 300 |   |                                   |
| CITY/ST/ZIP/CO: | BETHESDA, MD 20817                  |   |                                   |

|                 |                                     |                                  |  |
|-----------------|-------------------------------------|----------------------------------|--|
| NAME:           | JOHN K DELANEY                      | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | CHAIRMAN                            |                                  |  |
| ADDRESS:        | 6500 ROCK SPRING DRIVE<br>SUITE 300 |                                  |  |
| CITY/ST/ZIP/CO: | BETHESDA, MD 20817                  |                                  |  |

|                 |                                   |                                  |  |
|-----------------|-----------------------------------|----------------------------------|--|
| NAME:           | JOHN R LANE                       | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | VICE CHAIRMAN                     |                                  |  |
| ADDRESS:        | 6500 ROCK SPRING DRIVE<br>STE 300 |                                  |  |
| CITY/ST/ZIP/CO: | BETHESDA, MD 20817                |                                  |  |

|                 |                                   |   |  |
|-----------------|-----------------------------------|---|--|
| NAME:           | ROBERT K RUBIN                    | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | SECRETARY                         |   |  |
| ADDRESS:        | 6500 ROCK SPRING DRIVE<br>STE 300 |   |  |
| CITY/ST/ZIP/CO: | BETHESDA, MD 20817                |   |  |

|                 |                               |   |                                   |
|-----------------|-------------------------------|---|-----------------------------------|
| NAME:           | DALE G PHELPS                 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE:          | EVP/CFO                       |   |                                   |
| ADDRESS:        | 6500 ROCKSPRING DR<br>STE 300 |   |                                   |
| CITY/ST/ZIP/CO: | BETHESDA, MD 20817            |   |                                   |

|  |  |                                  |  |
|--|--|----------------------------------|--|
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | KAREN M BECKER<br>DIRECTOR<br>6500 ROCK SPRING DRIVE<br>SUITE 300<br>BETHESDA, MD 20817      | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | STUART MARSHALL BLOCH<br>DIRECTOR<br>6500 ROCK SPRING DRIVE<br>STE 300<br>BETHESDA, MD 20817 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | JOHN A BUCHMAN<br>DIRECTOR<br>6500 ROCK SPRING DRIVE<br>SUITE 300<br>BETHESDA, MD 20817      | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | DAVID COHN<br>DIRECTOR<br>6500 ROCK SPRING DRIVE<br>SUITE 300<br>BETHESDA, MD 20817          | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | NANCY K EBERHARDT<br>DIRECTOR<br>6500 ROCK SPRING DRIVE<br>SUITE 300<br>BETHESDA, MD 20817   | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | JASON FISH<br>DIRECTOR<br>6500 ROCK SPRING DRIVE<br>SUITE 300<br>BETHESDA, MD 20817          | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | THOMAS B FLEETER<br>DIRECTOR<br>6500 ROCK SPRING DRIVE<br>SUITE 300<br>BETHESDA, MD 20817    | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | CHRISTOPHER T JONES<br>DIRECTOR<br>6500 ROCK SPRING DRIVE<br>SUITE 300<br>BETHESDA, MD 20817 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | CAL SIMMONS, JR.<br>DIRECTOR<br>6500 ROCK SPRING DRIVE<br>SUITE 300<br>BETHESDA, MD 20817    | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | MICHAEL R ZACHARIA<br>DIRECTOR<br>6500 ROCK SPRING DRIVE<br>SUITE 300<br>BETHESDA, MD 20817  | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |

|                 |                                 |                                  |  |
|-----------------|---------------------------------|----------------------------------|--|
| NAME:           | CYNTHIA FLANDERS                | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | DIRECTOR                        |                                  |  |
| ADDRESS:        | 6500 ROCK SPRING DRIVE          |                                  |  |
| CITY/ST/ZIP/CO: | SUITE 300<br>BETHESDA, MD 20817 |                                  |  |

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/ DALE G PHELPS                                   | DALE G PHELPS, EVP/CFO           | 8/22/2013 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | 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.