

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 350020

FILED
Apr 29, 2009
Secretary of State

Entity Name: CITY NATIONAL BANK CORPORATION

Current Principal Place of Business:

25 W FLAGLER ST
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

ATTN: FINANCE DEPARTMENT
PO BOX 025620
MIAMI, FL 331025620

New Mailing Address:

FEI Number: 59-1271281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOCKETT, WILLIAM
25 W FLAGLER ST
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BRADY, THOMAS B
Address: 25 W FLAGLER ST
City-St-Zip: MIAMI, FL

Title: COB () Delete
Name: ABESS, LEONARD L JR
Address: 25 W FLAGLER ST
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: ABESS, ALLAN T JR
Address: 25 W FLAGLER ST
City-St-Zip: MIAMI, FL

Title: DEVP () Delete
Name: KUSHNAR, DANIEL S JR
Address: 25 WEST FLAGLER STREET
City-St-Zip: MIAMI, FL 33130

Title: D () Delete
Name: COWAN, IRVING
Address: 25 W FLAGLER ST
City-St-Zip: MIAMI, FL

Title: V (X) Delete
Name: PATLA, PATRICIA R
Address: 25 W FLAGLER ST
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FERRAZ, RAMON
Address: C/ ORENSE 81, 4TH 28020
City-St-Zip: MADRID, SP

Title: D (X) Change () Addition
Name: ABESS, LEONARD L JR
Address: 25 W FLAGLER ST
City-St-Zip: MIAMI, FL

Title: D (X) Change () Addition
Name: BREWER, HAROLD
Address: 25 W FLAGLER ST
City-St-Zip: MIAMI, FL

Title: D (X) Change () Addition
Name: GABARDA, LUIS E
Address: C/ ORENSE 81, 4TH 28020
City-St-Zip: MADRID, SP

Title: D (X) Change () Addition
Name: SANCHEZ-LOZANO, RAFAEL
Address: C/ ORENSE 81, 4TH 28020
City-St-Zip: MADRID, SP

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HAROLD BREWER

D

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date