

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 852347

FILED
May 01, 2009
Secretary of State

Entity Name: THE BANK OF NEW YORK, INC.

Current Principal Place of Business:

ONE WALL STREET
NEW YORK, NY 10286 US

New Principal Place of Business:

Current Mailing Address:

ONE WALL STREET-32ND FLOOR
C/O DOUGLAS J. DIFALCO
NY, NY 10286 US

New Mailing Address:

ONE WALL STREET
NEW YORK, NY 10286 US

FEI Number: 13-5160382

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: REIN, CATHERINE A
Address: ONE WALL ST.
City-St-Zip: NEW YORK, NY 10286

Title: CPD () Delete
Name: RENYI, THOMAS
Address: ONE WALL ST
City-St-Zip: NEW YORK, NY 10286

Title: P () Delete
Name: HASSELL, GERALD L
Address: ONE WALL ST.
City-St-Zip: NEW YORK, NY 10286

Title: SEV () Delete
Name: VAN SAUN, BRUCE W
Address: ONE WALL ST.
City-St-Zip: NEW YORK, NY 10286

Title: EV () Delete
Name: MASTRO, THOMAS J
Address: ONE WALL ST.
City-St-Zip: NEW YORK, NY 10286

Title: VP () Delete
Name: ZANGRE, ANTHONY
Address: ONE WALL STREET 32ND FLOOR
City-St-Zip: NY, NY 10286

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CD (X) Change () Addition
Name: KELLY, ROBERT
Address: ONE WALL ST
City-St-Zip: NEW YORK, NY 10286

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

Title: S (X) Change () Addition
Name: BICKET, PATRICIA
Address: ONE WALL ST.
City-St-Zip: NEW YORK, NY 10286

Title: EV (X) Change () Addition
Name: GIBBONS, THOMAS
Address: ONE WALL ST.
City-St-Zip: NEW YORK, NY 10286

Title: AS (X) Change () Addition
Name: PARRISH, BARBARA
Address: ONE WALL STREET
City-St-Zip: NY, NY 10286

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: BARBARA PARRISH

AS

05/01/2009

Electronic Signature of Signing Officer or Director

Date