2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2001 8:00 am
Secretary of State
04-25-2001 90022 029 ***150.00

DOCUMENT # 855725

1. Entity Name
WELLS FARGO FINANCIAL AMERICA, INC.

#2181

Principal Place of Business	Mailing Address
206 EIGHT STREET DES MOINES IA 50309	206 EIGHT STREET DES MOINES IA 50309

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 42-1185651 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DRUMHELLER, J.F. 250 INTERNATIONAL PARKWAY SUITE 146 HEATHROW FL 32746	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	WAGNER, STEVE R.		NAME	
STREET ADDRESS	206 EIGHT STREET		STREET ADDRESS	
CITY-ST-ZIP	DES MOINES IA		CITY-ST-ZIP	
TITLE	VP	☒ Delete	TITLE	Vice President ☐ Change ☒ Addition
NAME	VOS, RONALD D		NAME	Miller, Bruce A.
STREET ADDRESS	206 EIGHT STREET		STREET ADDRESS	206 Eighth Street
CITY-ST-ZIP	DES MOINES IA		CITY-ST-ZIP	Des Moines, IA 50309
TITLE	VPD	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	POETTING, GARY M		NAME	
STREET ADDRESS	206 EIGHT STREET		STREET ADDRESS	
CITY-ST-ZIP	DES MOINES IA		CITY-ST-ZIP	
TITLE	VP	☒ Delete	TITLE	Vice President ☐ Change ☒ Addition
NAME	WIELAND DENISE A.		NAME	Anderson, Dean R.
STREET ADDRESS	206 EIGHT STREET		STREET ADDRESS	206 Eighth Street
CITY-ST-ZIP	DES MOINES IA 50309		CITY-ST-ZIP	Des Moines, IA 50309
TITLE	SD	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	KUNZ, FAYE L.		NAME	
STREET ADDRESS	206 EIGHT STREET		STREET ADDRESS	
CITY-ST-ZIP	DES MOINES IA		CITY-ST-ZIP	
TITLE	T	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MATERA, MICHAEL J		NAME	
STREET ADDRESS	206 EIGHT STREET		STREET ADDRESS	
CITY-ST-ZIP	DES MOINES IA 50309		CITY-ST-ZIP	

CR2E034 (10/00)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Vice President 4/16/01 (515) 557-7502
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #