

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004895

FILED
Apr 17, 2012
Secretary of State

Entity Name: AMERIPRISE AUTO & HOME INSURANCE AGENCY, INC.

Current Principal Place of Business:

3500 PACKERLAND DRIVE
DEPERE, WI 54115

New Principal Place of Business:

3500 PACKERLAND DRIVE
DEPERE, WI 54115 US

Current Mailing Address:

3500 PACKERLAND DRIVE
DEPERE, WI 54115

New Mailing Address:

3500 PACKERLAND DRIVE
DEPERE, WI 54115 US

FEI Number: 82-0541142

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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

OFFICERS AND DIRECTORS:

Title: P
Name: FRAZIER, LARRY W
Address: 3500 PACKERLAND DRIVE
City-St-Zip: DEPERE, WI 54115 US

Title: VP
Name: GINGRICH, JON PATRICK
Address: 3500 PACKERLAND DRIVE
City-St-Zip: DEPERE, WI 54115 US

Title: SEC
Name: MOORE, THOMAS RICHARD
Address: 3500 PACKERLAND DRIVE
City-St-Zip: DEPERE, WI 54115 US

Title: TREA
Name: HAMALAINEN, JAMES LOUIS
Address: 3500 PACKERLAND DRIVE
City-St-Zip: DEPERE, WI 54115 US

Title: DIR
Name: GNIOT, TIFFANY R
Address: 3500 PACKERLAND DRIVE
City-St-Zip: DEPERE, WI 54115 US

Title: DIR
Name: GINGRICH, JON PATRICK
Address: 3500 PACKERLAND DRIVE
City-St-Zip: DEPERE, WI 54115 US

I hereby 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 all other like empowered.

SIGNATURE: KELLY LETTMANN

POA

04/17/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date