### 2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 814968** 

**Entity Name: RIVERSOURCE LIFE INSURANCE COMPANY** 

**Current Principal Place of Business:** 

707 SECOND AVENUE SOUTH MINNEAPOLIS. MN 55474

## **Current Mailing Address:**

707 SECOND AVENUE SOUTH MINNEAPOLIS. MN 55474 US

FEI Number: 41-0823832 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 US

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

**FILED** Mar 18, 2019

**Secretary of State** 

8355062883CC

#### Officer/Director Detail:

Title DIRECTOR, PRESIDENT Title **DIRECTOR** 

Name WOERNER, JOHN ROBERT Name ALVERO, GUMER CRUZ

Address 707 SECOND AVENUE SOUTH Address 707 SECOND AVENUE SOUTH

City-State-Zip: MINNEAPOLIS MN 55474 City-State-Zip: MINNEAPOLIS MN 55474

Title DIRECTOR Title DIRECTOR

Name LUNDGREN, COLIN J. Name BLASKE, STEPHEN P.

Address 707 SECOND AVENUE SOUTH Address 707 SECOND AVENUE SOUTH

MINNEAPOLIS MN 55474 City-State-Zip: MINNEAPOLIS MN 55474 City-State-Zip:

Title DIRECTOR Title **DIRECTOR** 

MCGRANE, BRIAN JOSEPH Name Name MCGEE, JENINNE C.

707 SECOND AVENUE SOUTH Address Address 707 SECOND AVENUE SOUTH

City-State-Zip: MINNEAPOLIS MN 55474 City-State-Zip: MINNEAPOLIS MN 55474

Title **SECRETARY** Title **TREASURER** 

Name MOORE, THOMAS RICHARD Name BREFELD, JAMES A. JR. Address 707 SECOND AVENUE SOUTH Address 707 SECOND AVENUE SOUTH MINNEAPOLIS MN 55474 City-State-Zip:

MINNEAPOLIS MN 55474 City-State-Zip:

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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: SUSAN M. BELTZ ASSISTANT SECRETARY

03/18/2019 Date

# Officer/Director Detail Continued:

Title ASST. SECRETARY
Name BELTZ, SUSAN M.

Address 707 SECOND AVENUE SOUTH

City-State-Zip: MINNEAPOLIS MN 55474