

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 13, 2016
Secretary of State
CC3054026733

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

Current Principal Place of Business:

3500 PACKERLAND DRIVE
DE PERE, WI 54115

Current Mailing Address:

3500 PACKERLAND DRIVE
DE PERE, WI 54115 US

FEI Number: 82-0541142

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name GINGRICH, JON PATRICK
Address 3500 PACKERLAND DRIVE
City-State-Zip: DE PERE WI 54115

Title SECRETARY
Name MOORE, THOMAS RICHARD
Address 3500 PACKERLAND DRIVE
City-State-Zip: DE PERE WI 54115

Title ASSISTANT SECRETARY
Name SMITH, SHELLY A.
Address 3500 PACKERLAND DRIVE
City-State-Zip: DE PERE WI 54115

Title TREASURER
Name HAMALAINEN, JAMES LOUIS
Address 3500 PACKERLAND DRIVE
City-State-Zip: DE PERE WI 54115

Title DIRECTOR
Name HOLEWINSKI, TINA
Address 3500 PACKERLAND DRIVE
City-State-Zip: DE PERE WI 54115

Title DIRECTOR
Name JENSEN, MICHELLE M.
Address 3500 PACKERLAND DRIVE
City-State-Zip: DE PERE WI 54115

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: SHELLY A. SMITH

ASSISTANT SECRETARY 04/13/2016

Electronic Signature of Signing Officer/Director Detail

Date