

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000004895

**FILED**  
**Mar 18, 2019**  
**Secretary of State**  
**5683200563CC**

**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           DIRECTOR, PRESIDENT  
Name           BOTSFORD, THOMAS SCOTT  
Address        3500 PACKERLAND DRIVE  
City-State-Zip: DE PERE WI 54115

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

Title           DIRECTOR, VP  
Name           JENSEN, MICHELLE M.  
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           TREASURER  
Name           BREFELD, JAMES A. JR.  
Address        3500 PACKERLAND DRIVE  
City-State-Zip: DE PERE WI 54115

Title           ASST. SECRETARY  
Name           BELTZ, SUSAN 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: SUSAN M. BELTZ**

**ASSISTANT SECRETARY   03/18/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date