

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000005251

**Entity Name:** RIVERSOURCE DISTRIBUTORS, INC.

**Current Principal Place of Business:**

707, 2ND AVE SO  
MINNEAPOLIS, MN 55474

**Current Mailing Address:**

707, 2ND AVE SO  
MINNEAPOLIS, MN 55474 US

**FEI Number:** 42-1690915

**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 ASSISTANT SECRETARY  
Name BELTZ, SUSAN M.  
Address 707, 2ND AVE SO  
City-State-Zip: MINNEAPOLIS MN 55474

Title PRESIDENT  
Name ABBOTT, LYNN  
Address 707, 2ND AVE SO  
City-State-Zip: MINNEAPOLIS MN 55474

Title SECRETARY  
Name MOORE, THOMAS RICHARD  
Address 707, 2ND AVE SO  
City-State-Zip: MINNEAPOLIS MN 55474

Title TREASURER  
Name HAMALAINEN, JAMES LOUIS  
Address 707, 2ND AVE SO  
City-State-Zip: MINNEAPOLIS MN 55474

Title DIRECTOR, VP  
Name ALVERO, GUMER CRUZ  
Address 707, 2ND AVE SO  
City-State-Zip: MINNEAPOLIS MN 55474

*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 04/12/2014

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

\_\_\_\_\_  
Date