

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000000867

Entity Name: AMERIPRISE HOLDINGS, INC.

Current Principal Place of Business:

707 2ND AVE SO
COUNTY: HENNEPIN
MINNEAPOLIS, MN 55474

Current Mailing Address:

707 2ND AVE SO
COUNTY: HENNEPIN
MINNEAPOLIS, MN 55474 US

FEI Number: 26-3878824

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/TREASURER
Name JHANJI, SHWETA
Address 707 2ND AVE SO
 COUNTY: HENNEPIN
City-State-Zip: MINNEAPOLIS MN 55474

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

Title ASSISTANT SECRETARY
Name SMITH, SHELLY A.
Address 707 2ND AVE SO
 COUNTY: HENNEPIN
City-State-Zip: MINNEAPOLIS MN 55474

Title DIRECTOR
Name GILMORE, MICHAEL H.
Address 707 2ND AVE SO
 COUNTY: HENNEPIN
City-State-Zip: MINNEAPOLIS MN 55474

Title DIRECTOR
Name HUBERS, KEVIN
Address 707 2ND AVE SO
 COUNTY: HENNEPIN
City-State-Zip: MINNEAPOLIS MN 55474

Title DIRECTOR
Name MCGRANE, BRIAN JOSEPH
Address 707 2ND AVE SO
 COUNTY: HENNEPIN
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: SHELLY A. SMITH

ASSISTANT SECRETARY 04/05/2017

Electronic Signature of Signing Officer/Director Detail

Date