

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000001133

**FILED**  
**Jan 15, 2014**  
**Secretary of State**  
**CC2706542887**

**Entity Name:** FARM CREDIT SERVICES OF AMERICA INCORPORATED, PCA

**Current Principal Place of Business:**

5015 S. 118 STREET  
OMAHA, NE 68137

**Current Mailing Address:**

5015 S. 118 STREET  
OMAHA, NE 68137

**FEI Number:** 47-0373522

**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 & CEO  
Name            STARK, DOUG  
Address        5015 S. 118 STREET  
City-State-Zip: OMAHA NE 68137

Title            EXECUTIVE VICE PRESIDENT  
Name            KEEGAN, KEN  
Address        5015 S. 118 STREET  
City-State-Zip: OMAHA NE 68137

Title            SVP-CHIEF FINANCIAL OFFICER  
Name            KINNISON, CRAIG  
Address        5015 S. 118 STREET  
City-State-Zip: OMAHA NE 68137

Title            SVP-CHIEF ADMINISTRATIVE OFFICER  
Name            FINKNER, ANN  
Address        5015 S. 118 STREET  
City-State-Zip: OMAHA NE 68137

Title            SVP-COMMERCIAL LENDING  
Name            ROBERGE, JAMES  
Address        5015 S. 118 STREET  
City-State-Zip: OMAHA NE 68137

Title            SVP-CHIEF RISK OFFICER  
Name            JENSEN, JAMES M  
Address        5015 S. 118 STREET  
City-State-Zip: OMAHA NE 68137

Title            SVP-CHIEF STRATEGY OFFICER  
Name            MARTIN, DAVE  
Address        5015 S. 118 STREET  
City-State-Zip: OMAHA NE 68137

Title            SVP-GENERAL COUNSEL  
Name            COZIAHR, SCOTT  
Address        5015 S. 118 STREET  
City-State-Zip: OMAHA NE 68137

*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:** JAMES ROBERGE

**SVP-COMMERCIAL  
LENDING**

**01/15/2014**

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

\_\_\_\_\_  
Date