

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14401

Entity Name: THRIVENT INVESTMENT MANAGEMENT INC.**Current Principal Place of Business:**625 FOURTH AVE. SOUTH
MINNEAPOLIS, MN 55415-1665**Current Mailing Address:**625 FOURTH AVE. SOUTH
MS REG FINANCIAL
MINNEAPOLIS, MN 55415-1665**FEI Number:** 39-1559375**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. 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 TREASURER, CFO, DIRECTOR
 AFFILIATE FINANCE
Name TURESON, KURT
Address 625 FOURTH AVE. SOUTH
City-State-Zip: MINNEAPOLIS MN 55415-1665

Title ASSISTANT SECRETARY
Name SALWEI, TRACY
Address 625 FOURTH AVE. SOUTH
City-State-Zip: MINNEAPOLIS MN 55415-1665

Title VP, DIRECTOR
Name FUEHRMEYER, MIKE
Address 625 FOURTH AVE. SOUTH
City-State-Zip: MINNEAPOLIS MN 55415-1665

Title CHIEF COMPLIANCE OFFICER
Name GOLIS, ANDREA
Address 625 FOURTH AVE. SOUTH
City-State-Zip: MINNEAPOLIS MN 55415-1665

Title PRESIDENT, DIRECTOR
Name LARSON, KAREN
Address 625 FOURTH AVE. SOUTH
City-State-Zip: MINNEAPOLIS MN 55415-1665

Title VP
Name GLOVACKI, JENNIFER
Address 625 FOURTH AVE. SOUTH
City-State-Zip: MINNEAPOLIS MN 55415-1665

Title VP
Name SORUM, NIKKI
Address 625 FOURTH AVE. SOUTH
City-State-Zip: MINNEAPOLIS MN 55415-1665

Title SECRETARY, CHIEF LEGAL OFFICER
Name BADO, PETER
Address 625 FOURTH AVE. SOUTH
City-State-Zip: MINNEAPOLIS MN 55415-1665

Continues on page 2

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: KURT TURESON

TREASURER

01/31/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP OF SUPERVISION
Name OSBORNE, CHRISTOPHER
Address 625 FOURTH AVE. SOUTH
City-State-Zip: MINNEAPOLIS MN 55415-1665

Title VP OF SERVICE OPERATIONS
Name KORNAUS, BRUCE
Address 625 FOURTH AVE. SOUTH
City-State-Zip: MINNEAPOLIS MN 55415-1665

Title VP
Name YOUNG, TOM
Address 625 FOURTH AVE. SOUTH
City-State-Zip: MINNEAPOLIS MN 55415-1665

Title VP OF CORPORATE
ADMINISTRATION
Name PLAMANN, SUE
Address 625 FOURTH AVE. SOUTH
City-State-Zip: MINNEAPOLIS MN 55415-1665

Title DIRECTOR
Name BOUSHEK, RANDALL L
Address 625 FOURTH AVE. SOUTH
City-State-Zip: MINNEAPOLIS MN 55415-1665

Title VP
Name KLOSTER, DAVE
Address 625 FOURTH AVE. SOUTH
City-State-Zip: MINNEAPOLIS MN 55415-1665