

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004094

FILED
Apr 16, 2004
Secretary of State

Entity Name: WELLS FARGO SERVICES COMPANY

Current Principal Place of Business:

8901 MOUNTAIN VIEW RD
SCOTTSDALE, AZ 85258

New Principal Place of Business:

Current Mailing Address:

SUITE N9305-173
SIXTH AND MARQUETTE
MINNEAPOLIS, MN 55479

New Mailing Address:

FEI Number: 41-0941462 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: EDWARDS, C. WEBB
Address: 8901 E. MOUNTAIN VIEW ROAD
City-St-Zip: SCOTTSDALE, AZ 85258

Title: V () Delete
Name: ALLEN, TERRY
Address: 4110 N. SCOTTSDALE ROAD
City-St-Zip: SCOTTSDALE, AZ 85251

Title: V () Delete
Name: ANDERSON, MARK
Address: 8901 E. MOUNTAIN VIEW ROAD
City-St-Zip: SCOTTSDALE, AZ 85258

Title: V () Delete
Name: BLEW, SUSAN
Address: 155 5TH STREET
City-St-Zip: SAN FRANCISCO, CA 94103

Title: V () Delete
Name: DZIEWECZYNSKI, HEIDI
Address: SIXTH AND MAQUETTE
City-St-Zip: MINNEAPOLIS, MN 55479

Title: V () Delete
Name: BLADOW, RITA
Address: 1300 S.W. 5TH AVENUE
City-St-Zip: PORTLAND, OR 97201

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WEBB EDWARDS

PCEO

04/16/2004

Electronic Signature of Signing Officer or Director

_____ Date

DALE PEARCE, EVP, CFO & SECRETARY
100 PINE STREET
SAN FRANCISCO, CA 94104

MARGARET WEBER, ASSISTANT SECRETARY
N9305-173
SIXTH & MARQUETTE
MINNEAPOLIS, MN 55479