2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004905

Entity Name: FIRST INTERSTATE FINANCIAL CORP.

FILED Jan 05, 2005 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
	THE COMMO URY, NJ 0770					
Current Mailing Address:			New Mailir	New Mailing Address:		
	THE COMMO URY, NJ 0770					
FEI Number:	22-2757521	FEI Number Applied For()	FEI Number Not Appli	cable () Cer	rtificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New	Registered Agent:	
1333 NORT	ILING & SEAR 'H DUVAL STI SEE, FL 3230					
The above in the State		ubmits this statement for the pur	rpose of changing it	s registered office	or registered agent, or both,	
SIGNATUR	E:					
	Electroni	c Signature of Registered Agent	t		Date	
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DP () GUNTHER, KEN 39 AVE. AT THE SHREWSBURY,	COMMONS	Title: Name: Address: City-St-Zip:	()Cha	nge()Addition	
Title: Name: Address: City-St-Zip:	DV () MONTANI, LAWI 39 AVE. AT THE SHREWSBURY,	COMMONS	Title: Name: Address: City-St-Zip:	() Cha	nge()Addition	
Title: Name: Address: City-St-Zip:	DV () SAVOCA, ANDR 39 AVE. AT THE SHREWSBURY,	COMMONS	Title: Name: Address: City-St-Zip:	() Cha	nge()Addition	
Title: Name: Address: City-St-Zip:	DST () PAYOR, JAMES 39 AVE. AT THE SHREWSBURY,	COMMONS	Title: Name: Address: City-St-Zip:	() Cha	nge () Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	DV () Chai PASCOCELLO, EDV 39 AVE AT THE COM SHREWSBURY, NJ	MMONS	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	CFO () Char BADAMI, JOHN 39 AVE AT THE COM SHREWSBURY, NJ		

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: KENNETH GUNTHER DP 01/05/2005