2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004905

Entity Name: FIRST INTERSTATE FINANCIAL CORP.

FILED Jan 09, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
39 AVE. AT THE COMMONS SHREWSBURY, NJ 07702				39 AVE AT THE COMMONS SHREWSBURY, NJ 07702				
Current Mailing Address:				New Mailing Address:				
39 AVE. AT THE COMMONS SHREWSBURY, NJ 07702			39 AVE AT THE COMMONS SHREWSBURY, NJ 07702					
FEI Number: 2	22-2757521	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable ()	Certificate of Status Desire	ed ()	
Name and Address of Current Registered Agent: N					Name and Address of New Registered Agent:			
FLORIDA FILING & SEARCH SERVICES, INC. 155 OFFICE PLAZA DR. SUITE A TALLAHASSEE, FL 32301 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.								
SIGNATUR	E:							
Electronic Signature of Registered Agent				Date				
Election Cam	paign Financing 1	Frust Fund Contribution ().						
OFFICERS AND DIRECTORS:				${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$				
Title: Name: Address: City-St-Zip:	GUNTHER, KENN 39 AVE. AT THE C SHREWSBURY, I	COMMONS NJ 07702		Title: Name: Address: City-St-Zip:	GUNTHER, KE 39 AVE AT TH SHREWSBUR	E COMMONS Y, NJ 07702		
Title: Name: Address: City-St-Zip:	DV () D MONTANI, LAWR 39 AVE. AT THE C SHREWSBURY, I	COMMONS		Title: Name: Address: City-St-Zip:	DV () MONTANI, LA\ 39 AVE AT TH SHREWSBUR	E COMMONS		
Title: Name: Address: City-St-Zip:	DV () D SAVOCA, ANDRE 39 AVE. AT THE O SHREWSBURY, I	COMMONS		Title: Name: Address: City-St-Zip:	DV () SAVOCA, AND 39 AVE AT TH SHREWSBUR	E COMMONS		
Title: Name: Address: City-St-Zip:	DST (X) D PAYOR, JAMES 39 AVE. AT THE C SHREWSBURY, I			Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	DV () D PASCOCELLO, E 39 AVE AT THE C SHREWSBURY, I	COMMONS		Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	CFO () D BADAMI, JOHN 39 AVE AT THE C SHREWSBURY, I			Title: Name: Address: City-St-Zip:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JOHN BADAMI CFO 01/09/2007