

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002098

FILED  
Apr 23, 2007  
Secretary of State

Entity Name: U.S. BANCORP INVESTMENTS, INC.

## Current Principal Place of Business:

60 LIVINGSTON AVENUE  
ST. PAUL, MN 55107

## New Principal Place of Business:

## Current Mailing Address:

800 NICOLLET MALL  
21ST FLOOR  
MINNEAPOLIS, MN 554027020

## New Mailing Address:

FEI Number: 41-1233380      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: D ( ) Delete  
Name: SHORT, STEVEN M  
Address: 1 STAR PLAZA  
City-St-Zip: SAINT LOUIS, MO 63101

Title: D ( ) Delete  
Name: MCCORMACK, DANIEL J  
Address: 809 SOUTH 60TH STREET, SUITE 205  
City-St-Zip: WEST ALLIS, WI 53214

Title: S ( ) Delete  
Name: VAN HORN, GAIL  
Address: 800 NICOLLET MALL  
City-St-Zip: MINNEAPOLIS, MN 55402

Title: T ( ) Delete  
Name: TRUEMAN, DANIEL J  
Address: 7TH AND WASHINGTON STREETS  
City-St-Zip: ST. LOUIS, MO 63101

Title: DVP ( ) Delete  
Name: GAUSTAD, MELISSA A  
Address: 60 LIVINGSTON AVENUE  
City-St-Zip: ST. PAUL, MN 55107

Title: PCED (X) Delete  
Name: SHORT, STEVEN M  
Address: 425 WALNUT ST  
City-St-Zip: CINCINNATI, OH 45202

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: JACOBSMEYER, CAROL J  
Address: 7TH & WASHINGTON STREETS  
City-St-Zip: SAINT LOUIS, MO 63101

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: VP (X) Change ( ) Addition  
Name: ODEGAARD, KATHLEEN R  
Address: 60 LIVINGSTON AVENUE  
City-St-Zip: ST. PAUL, MN 55107

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 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: GAIL VAN HORN

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04/23/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date