

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002435

FILED
Feb 11, 2011
Secretary of State

Entity Name: SECURIAN FINANCIAL NETWORK, INC.

Current Principal Place of Business:

400 ROBERT STREET NORTH
ST PAUL, MN 55101 US

New Principal Place of Business:

Current Mailing Address:

400 ROBERT STREET NORTH
ST PAUL, MN 55101 US

New Mailing Address:

FEI Number: 41-1741986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
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

OFFICERS AND DIRECTORS:

Title: S
Name: PROHOFSKY, DENNIS
Address: 400 ROBERT STREET NORTH
City-St-Zip: SAINT PAUL, MN 55101

Title: VP
Name: NETTELL, CHARLES
Address: 400 ROBERT STREET NORTH
City-St-Zip: ST PAUL, MN 55101 US

Title: AS
Name: CZARNETZKI, DEAN
Address: 400 ROBERT ST N
City-St-Zip: SAINT PAUL, MN 55101 US

Title: D
Name: ZACCARO, WARREN
Address: 400 ROBERT STREET NORTH
City-St-Zip: ST PAUL, MN 55101 US

Title: D
Name: RADEL, DWAYNE
Address: 400 ROBERT STREET NORTH
City-St-Zip: ST PAUL, MN 55101 US

Title: PD
Name: SWANSON, NANCY
Address: 400 ROBERT ST N
City-St-Zip: SAINT PAUL, MN 55101

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: DEAN CZARNETZKI

AS

02/11/2011

Electronic Signature of Signing Officer or Director

Date