2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2005
Secretary of State

DOCUMENT# P40676

Entity Name: PRIMEVEST FINANCIAL SERVICES, INC.

Current Principal Place of Business:

400 1ST STR SO
STE 300
ST CLOUD, MN 56301 US

New Principal Place of Business:

Current Mailing Address:

20 WASHINGTON AVE. S.
RT. 1261
MINNEAPOLIS, MN 55401 US

New Mailing Address:

FEI Number: 41-1483314 **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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PCEO	( ) Delete
Name:	CICCATI, RANDALL	
Address:	400 S. FIRST STREET,#300	
City-St-Zip:	ST. CLOUD, MN	
Title:	VP	( ) Delete
Name:	RUMMEL-MCCOOL, LEANN	
Address:	400 FIRST ST SOUTH STE 300	
City-St-Zip:	ST. CLOUD, MN	
Title:	VPAS	( ) Delete
Name:	MAAS, KEVIN	
Address:	400 S. FIRST STREET,#300	
City-St-Zip:	ST. CLOUD, MN	
Title:	D	( ) Delete
Name:	CICCATI, RANDALL	
Address:	400 1ST ST., #300	
City-St-Zip:	SAINT CLOUD, MN 56301	
Title:	D	( ) Delete
Name:	SIMMERS, JOHN S	
Address:	2780 SKYPARK DRIVE	
City-St-Zip:	TORRANCE, CA 92108	
Title:	S	( ) Delete
Name:	CLUDRAY-ENGELKE, PAULA	
Address:	20 WASHINGTON AVE. S.	
City-St-Zip:	MINNEAPOLIS, MN 55401	

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
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	SIMMERS, JOHN S	
Address:	200 N. SEPULVEDA BLVD	
City-St-Zip:	EL SEGUNDO, CA 92108	
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: PAULA CLUDRAY-ENGELKE S 07/05/2005

Electronic Signature of Signing Officer or Director Date