## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000032541

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FILED Mar 04, 2004 Secretary of State

Entity Name: EMBASSY FINANCIAL SERVICES, INC.					
Current Principal Place of Business:			New Principal Place of Business:		
666 GRAND AVENUE, #2900 DES MOINES, IA 50309 US					
Current Mailing Address:			New Mailing Address:		
POST OFFICE BOX 657 DES MOINES, IA 503030657					
FEI Number: 65-0669509 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )					
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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.					
SIGNATURE:					
Electronic Signature of Registered Agent				Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DC () HARPER, ALLEN 1360 S DIXIE HI CORAL GABLES	GHWAY	Title: Name: Address: City-St-Zip:	PRES (X) Change ( ) Addition PELTIER, RONALD 6800 FRANCE AVE. S EDINA, MN 55435	
Title: Name: Address: City-St-Zip:	DS () SHUFFIELD, RO 1360 S DIXIE HI CORAL GABLES	GHWAY	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition JOHNSON, GALEN 6800 FRANCE AVE. S EDINA, MN 55435	
Title: Name: Address: City-St-Zip:	DP () NEWMEYER, JA 1390 S DIXIE HV CORAL GABLES	VY, #1310	Title: Name: Address: City-St-Zip:	SEC (X) Change ( ) Addition LEIGHTON, PAUL 666 GRAND AVE. DES MOINES, IA 50309	
Title: Name: Address: City-St-Zip:	V () FOREMAN, SUS 1390 S DIXIE HV CORAL GABLES	VY #1310	Title: Name: Address: City-St-Zip:	DIR (X) Change ( ) Addition PELTIER, RONALD 6800 FRANCE AVE. S EDINA, MN 55435	
Title: Name: Address: City-St-Zip:	V () LLERANDI, DIAN 1390 S DIXIE HV CORAL GABLES	VY #1310	Title: Name: Address: City-St-Zip:	DIR (X) Change ( ) Addition JOHNSON, GALEN 6800 FRANCE AVE. S EDINA, MN 55435	
Title: Name: Address:	V (X) CHIN, VALERIE 1390 S DIXIE HV		Title: Name: Address:	( ) Change ( ) Addition	

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: PAUL LEIGHTON 03/04/2004 SEC