No. C 145606		Due no later than Sep 30, 2018		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. AMERIPRISE AUTO & HOME INSURANCE AGENCY, INC. 3500 PACKERLAND DRIVE DE PERE WI 54115 USA						
				J. INGW REGISTERED AGENT SIGNATURE.				
4. Corporations: Enter Na	ames and Busin	ess Addresses of Presi	dent, Secretary, and Directors. Treasu	ırer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
TREASURER	JAMES A. BREFELD JR.		3500 PACKERLAND DRIVE	DE PERE	WI	USA	54115	
DIRECTOR TINA M. HOL			3500 PACKERLAND DRIVE	DE PERE	WI	USA	54115	
PRESIDENT	THOMAS SCOTT BOTSFORD		3500 PACKERLAND DRIVE	DE PERE	WI	USA	54115	
SECRETARY THOMAS RICHAR			3500 PACKERLAND DRIVE	DE PERE	WI	USA	54115	
DIRECTOR	MICHELLE M. JENSEN		3500 PACKERLAND DRIVE	DE PERE	WI	USA	54115	
DIRECTOR	THOMAS SC	OTT BOTSFORD	3500 PACKERLAND DRIVE	DE PERE	WI	USA	54115	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
WI		Signature: Bradley Slenker		Date:	Date: 08/07/2018			
C 145606		Name (type or print): Bradley Slenker		Title: Power of Attorney				
Processed 08/07/2018		* Electronically provide	ed signatures are accepted as original	signatures.				