

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19699

Entity Name: PRINCIPAL MANAGEMENT CORPORATION

Current Principal Place of Business:

711 HIGH STREET
DES MOINES, IA 50392

Current Mailing Address:

711 HIGH STREET
ATTN: SHIRLEY HOLLISTER, G-031-W40
DES MOINES, IA 50392-0306 US

FEI Number: 42-0948302

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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

Officer/Director Detail :

Title TREASURER/VP
Name BUTTON, TERESA M
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

Title DIRECTOR
Name ELMING, GREGORY B
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

Title PRESIDENT/CEO/DIRECTOR
Name BEER, MICHAEL J
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

Title ASSISTANT SECRETARY
Name BARRY, PATRICIA A
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

Title EVP/GENERAL
 COUNSEL/SECRETARY
Name SHAFF, KAREN E
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

Title SVP/DIRECTOR
Name BOLLIN, TRACY W
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

Title SVP/DIRECTOR
Name WELCH, RANDY L
Address 711 HIGH STREET
City-State-Zip: DES MOINES IA 50392

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: PATRICIA A BARRY

ASSISTANT SECRETARY 04/30/2015

Electronic Signature of Signing Officer/Director Detail

Date