

1.) CORPORATION NAME:

Investment Centers of America, Inc.

DUE DATE: **4/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1421710**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

ND

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 212 N. 4TH STREET

CITY/ST/ZIP: BISMARCK, ND 58501

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	GREGORY CRAIG GUNDERSON	
TITLE:	PRESIDENT	
ADDRESS:	212 N 4TH ST	
CITY/ST/ZIP/CO:	BISMARCK, ND 58501	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	BARB BECKER	
TITLE:	VICE PRESIDENT	
ADDRESS:	212 N 4TH STREET	
CITY/ST/ZIP/CO:	BISMARCK, ND 58501	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	BRETT BENGTON	
TITLE:	VICE PRESIDENT	
ADDRESS:	212 N 4TH STREET	
CITY/ST/ZIP/CO:	BISMARCK, ND 58501	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MARK BRAKEL	
TITLE:	SENIOR VP	
ADDRESS:	212 N 4TH STREET	
CITY/ST/ZIP/CO:	BISMARCK, ND 58501	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JEREMY BURTON	
TITLE:	ASSIST VP	
ADDRESS:	212 N 4TH STREET	
CITY/ST/ZIP/CO:	BISMARCK, ND 58501	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DEBBIE CHANDLER	
TITLE:	REGIONAL VP	
ADDRESS:	212 N 4TH STREET	
CITY/ST/ZIP/CO:	BISMARCK, ND 58501	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MAURA COLLINS SR VP/CFO 401 WILSHIRE BLVD STE 1100 SANTA MONICA, CA 90401	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JON DESMIDT ASSIST VP 212 N 4TH STREET BISMARCK, ND 58501	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SCOTT FORBUSH VICE PRESIDENT 1 CORPORATE WAY LANSING, MI 48951	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES GARRISON ASSIST VP 1 CORPORATE WAY LANSING, MI 48951	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GERRY GUNDERSON SR VP 212N 4TH STREET BISMARCK, ND 58501	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAN HERMAN VICE PRESIDENT 212 N 4TH STREET BISMARCK, ND 58501	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRYON HILL SENIOR VP 212 N 4TH STREET BISMARCK, ND 58501	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALICE (HITTLE) NAEF VICE PRESIDENT 212 N 4TH STREET BISMARCK, ND 58501	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES J HUDOCK VICE PRESIDENT 212 N 4TH STREET BISMARCK, ND 58501	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAWN KALINOWSKI SENIOR VP 212 N 4TH STREET BISMARCK, ND 58501	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES KOMOSZEWSKI SENIOR VP 212 N 4TH STREET BISMARCK, ND 58501	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	VANESSA LAMBRECHTS VICE PRESIDENT 401 WILSHIRE BLVD STE 1200 SANTA MONICA, CA 90401	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LAWRENCE LANGEMO SENIOR VP 212 N 4TH STREET BISMARCK, ND 58501	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID A LOASBY VICE PRESIDENT 212 N 4TH STREET BISMARCK, ND 58501	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TODD MANEVAL ASSIST VP 1 CORPORATE WAY LANSING, MI 48951	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KELLY VANALSTINE ASSIST VP 212 N 4TH STREET BISMARCK, ND 58501	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DANIEL WEISS VICE PRESIDENT 7601 TECHNOLOGY WAY DENVER, CO 80237	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS J. MEYER SECRETARY 1 CORPORATE WAY LANSING, MI 48951	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CLIFFORD JACK DIRECTOR 7601 TECHNOLOGY WAY DENVER, CO 80237	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KRISTAN RICHARDSON ASST SECRETARY 1 CORPORATE WAY LANSING, MI 48951	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL DEROSA ASSIST VP 212 N 4TH STREET BISMARCK, ND 58501	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GERRY GUNDERSON DIRECTOR 212 N 4TH STREET BISMARCK, ND 58501	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	RYAN ARMOCK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	212 N 4TH STREET		
CITY/ST/ZIP/CO:	BISMARCK, ND 58501		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ THOMAS J. MEYER	THOMAS J. MEYER, SECRETARY	4/17/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.