

1.) CORPORATION NAME:

American Enterprise Services Company

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1707340**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

IA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 601 SIXTH AVENUE

CITY/ST/ZIP: DES MOINES, IA 50309

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.

NAME:	MICHAEL E. ABBOTT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT/CEO		
ADDRESS:	601 SIXTH AVENUE		
CITY/ST/ZIP/CO:	DES MOINES, IA 50309		
NAME:	MARK S MOVIC	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	601 6TH AVENUE		
CITY/ST/ZIP/CO:	DES MOINES, IA 50309		
NAME:	TIMOTHY J HALL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	601 6TH AVENUE		
CITY/ST/ZIP/CO:	DES MOINES, IA 50309		
NAME:	CRAIG W. BAINBRIDGE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 SIXTH AVENUE		
CITY/ST/ZIP/CO:	DES MOINES, IA 50309		
NAME:	JOSEPH E. BLAIR, JR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 SIXTH AVENUE		
CITY/ST/ZIP/CO:	DES MOINES, IA 50309		
NAME:	RUSSELL C DAVIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 6TH AVENUE		
CITY/ST/ZIP/CO:	DES MOINES, IA 50309		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TOM D. EILERS DIRECTOR 601 SIXTH AVENUE DES MOINES, IA 50309	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRENT B. "CHRIS" GREEN DIRECTOR 601 SIXTH AVENUE DES MOINES, IA 50309	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN L MAGINN DIRECTOR 601 6TH AVENUE DES MOINES, IA 50309	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES A WALKER DIRECTOR 601 6TH AVENUE DES MOINES, IA 50309	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUSAN E VOSS VICE PRESIDENT 601 6TH AVENUE DES MOINES, IA 50309	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MEDHA K JOHNSON ASST VICE PRES 601 6TH AVENUE DES MOINES, IA 50309	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SARA E LEHAN ASST VICE PRES 601 6TH AVENUE DES MOINES, IA 50309	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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/ TIMOTHY J HALL SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TIMOTHY J HALL, SECRETARY PRINTED NAME AND CORPORATE TITLE	4/15/2014 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.			