

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005313

FILED
Mar 11, 2010
Secretary of State

Entity Name: TCF EQUIPMENT FINANCE, INC.

Current Principal Place of Business:

11100 WAYZATA BOULEVARD
SUITE 801
MINNETONKA, MN 55305

New Principal Place of Business:

Current Mailing Address:

11100 WAYZATA BOULEVARD
SUITE 801
MINNETONKA, MN 55305

New Mailing Address:

FEI Number: 41-1943997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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 Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDC
Name: DAHL, CRAIG R
Address: 11100 WAYTATA BLVD STE 801
City-St-Zip: MINNETONKA, MN 55305

Title: VD
Name: NYQUIST, MARK D
Address: 11100 WAYTARA BLVD STE 801
City-St-Zip: MINNETONKA, MN 55305

Title: D
Name: BROWN, NEIL W
Address: 200 LAKE STREET EAST
City-St-Zip: WAYZATA, MN 55391

Title: DT
Name: JASPER, THOMAS F
Address: 200 LAKE STREET EAST
City-St-Zip: WAYZATA, MN 55391

Title: SV
Name: GUNSTAD, BRADLEY C
Address: 11100 WAYZATA BLVD 801
City-St-Zip: MINNETONKA, MN 55305

Title: D
Name: COOPER, WILLIAM A
Address: 200 LAKE STREET EAST
City-St-Zip: WAYZATA, MN 55391

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: JOSEPH T. GREEN

AS

03/11/2010

Electronic Signature of Signing Officer or Director

Date