### **2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M14000003154

Entity Name: MUTUAL OF AMERICA CAPITAL MANAGEMENT LLC

FILED
Mar 09, 2015
Secretary of State
CC7469645736

**Current Principal Place of Business:** 

320 PARK AVE

NEW YORK, NY 10022

# **Current Mailing Address:**

320 PARK AVE

NEW YORK, NY 10022

FEI Number: 13-3701801 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

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

## Authorized Person(s) Detail:

Title VPS Title GC

Name ROTHSTEIN, SCOTT H Name ROTHSTEIN, SCOTT H

Address 320 PARK AVE Address 320 PARK AVE

City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022

Title DIRECTOR Title DIRECTOR

Name LEAR, AMIR Name BISCHOFF, THERESA A

Address 320 PARK AVE Address 320 PARK AVE

City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022

Title DIRECTOR Title DIRECTOR

Name CULHANE, NOREEN M Name DAVIS, NATHANIEL A

Address 320 PARK AVE Address 320 PARK AVE

City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022

TitleDIRECTORTitleDIRECTORNameGOLDEN, ROBERT CNameHAIRE, JOHN EAddress320 PARK AVEAddress320 PARK AVE

City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022

### Continues on page 2

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GEORGE L. MEDLIN TREASURER 03/09/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date

# Authorized Person(s) Detail Continued:

Title DIRECTOR Title DIRECTOR

Name QUICK, CHRISTOPHER C Name QUINN, JAMES E

Address 320 PARK AVE Address 320 PARK AVE

City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022

Title DIRECTOR Title DIRECTOR

NameSMITH IV, ALFRED ENameSTACK, JOHN JAddress320 PARK AVEAddress320 PARK AVE

City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022

Title CEO Title PRESIDENT

Name LEAR, AMIR Name DILLMAN, THOMAS J

Address 320 PARK AVE Address 320 PARK AVE

City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022

Title CFO Title SEVP, GEN. COUNSEL

Name GREED, JOHN R Name ROTH, JAMES J

Address 320 PARK AVE Address 320 PARK AVE

City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022

Title EVP, INTERNAL AUDITOR Title EVP, DEPUTY TREASURER

Name CORRIGAN, JOHN J Name FESTOG, CHRIS W

Address 320 PARK AVE Address 320 PARK AVE

City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022

Title EVP Title EVP, CCO

Name HEISKELL, ANDREW L Name LU, KATHRYN A

Address 320 PARK AVE Address 320 PARK AVE

City-State-Zip: NEW YORK NY 10022

Title EVP, TREASURER Title EVP

Name MEDLIN, GEORGE L

Address 320 PARK AVE

Address 320 PARK AVE

City-State-Zip: NEW YORK NY 10022

Title EVP

Name WETTERAU, GARY P
Name WAGNER, MARGUERITE H

Address 320 PARK AVE

City-State-Zip: NEW YORK NY 10022