2019 FOREIGN NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 809076

Entity Name: TEACHERS INSURANCE AND ANNUITY ASSOCIATION OF

AMERICA

Current Principal Place of Business:

730 THIRD AVENUE MS: 703/12/02

NEW YORK, NY 10017

Current Mailing Address:

730 THIRD AVENUE MS: 703/12/02

NEW YORK, NY 10017 US

FEI Number: 13-1624203 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

FILED

Sep 05, 2019

Secretary of State 3831606887CC

Officer/Director Detail:

l itle	PRESIDENT	Title	TREASURER
Name	FERGUSON JR., ROGER W.	Name	GUTIERREZ, JORGE
Address	730 THIRD AVENUE	Address	730 THIRD AVENUE
City-State-Zip:	NEW YORK NY 10017	City-State-Zip:	NEW YORK NY 10017

Title TRUSTEE Title CORPORATE SECRETARY

NameHUNDERT, EDWARDNameBHALLA, MONAAddress730 THIRD AVENUEAddress730 THIRD AVENUECity-State-Zip:NEW YORK NY 10017City-State-Zip: NEW YORK NY 10017

Title TRUSTEE Title TRUSTEE

NameHESS, LISA W.NameROBINSON, DOROTHYAddress730 THIRD AVENUEAddress730 THIRD AVENUECity-State-Zip:NEW YORK NY 10017City-State-Zip:NEW YORK NY 10017

Title TRUSTEE Title TRUSTEE

NameBROWN, JEFFREYNameCHAMBERS, JAMESAddress730 THIRD AVENUEAddress730 THIRD AVENUECity-State-Zip:NEW YORK NY 10017City-State-Zip:NEW YORK NY 10017

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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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BHALLA, MONA CORPORATE 09/05/2019 SECRETARY

Officer/Director Detail Continued:

Title TRUSTEE

Name O'HARA, MAUREEN
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title TRUSTEE

Name RIBEAU, SIDNEY
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title TRUSTEE

Name SHEDLARZ, DAVID
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title TRUSTEE

Name TIENDA, MARTA
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title TRUSTEE

Name BROWN, PRISCILLA SIMS

Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title SENIOR DIRECTOR
Name SWINK, MICHAEL

Address SIX CONCOURSE PARKWAY

STE 2600

City-State-Zip: ATLANTA GA 30328

Title TRUSTEE

Name PETERSON, DONALD
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title TRUSTEE

Name SHARAN, KIM M.
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title TRUSTEE

Name THOMPSON, RONALD L.
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title TRUSTEE

Name FRANKLIN, TAMARA SIMPKINS

Address 730 THIRD AVE

City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED SIGNER, DIRECTOR

Name RUSSO, CHARLES C.
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017