

**2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 809076

**FILED  
Apr 27, 2013  
Secretary of State  
CC1408660578**

**Entity Name:** TEACHERS INSURANCE AND ANNUITY ASSOCIATION OF AMERICA

**Current Principal Place of Business:**

730 THIRD AVENUE  
NEW YORK, NY 10017

**Current Mailing Address:**

730 THIRD AVENUE  
NEW YORK, NY 10017

**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

**Officer/Director Detail :**

Title PCD  
Name FERGUSON JR, ROGER W  
Address 730 THIRD AVENUE  
City-State-Zip: NEW YORK NY 10017

Title D  
Name YACOVETTA, MARK  
Address 8500 ANDREW CARNEGIE BLVD  
City-State-Zip: CHARLOTTE NC 28262

Title VPT  
Name GUTIERREZ, JORGE  
Address 730 THIRD AVENUE  
City-State-Zip: NEW YORK NY 10017

Title VPAS  
Name PIERRE-MERRITT, MARJORIE  
Address 730 THIRD AVENUE  
City-State-Zip: NEW YORK NY 10017

Title D  
Name CRAWFORD, MICHAEL  
Address 8500 ANDREW CARNEGIE BLVD  
City-State-Zip: CHARLOTTE NC 28262

Title D  
Name MENDEZ, ILEANA  
Address 730 THIRD AVENUE  
City-State-Zip: NEW YORK NY 10017

*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: MARJORIE PIERRE-MERRITT**

**VPAS**

**04/27/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date