

**2015 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  
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            PRESIDENT, CEO  
Name            FERGUSON , ROGER  
Address        730 THIRD AVENUE  
City-State-Zip: NEW YORK NY 10017

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

Title            VP, ASST. SECRETARY  
Name            PIERRE-MERRITT, MARJORIE  
Address        730 THIRD AVENUE  
City-State-Zip: NEW YORK NY 10017

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

Title            SR. DIRECTOR  
Name            RAGLAND, JOHN  
Address        8500 ANDREW CARNEGIE BLVD  
City-State-Zip: CHARLOTTE NC 28262

Title            SR. DIRECTOR  
Name            SIMPKINS, BRAD  
Address        8500 ANDREW CARNEGIE BLVD  
City-State-Zip: CHARLOTTE NC 28262

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

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

*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**

**VP, ASST. SECRETARY**

**06/19/2015**

Electronic Signature of Signing Officer/Director Detail

Date