

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03000005526

**Entity Name:** TCF REAL ESTATE MANAGEMENT CORPORATION**Current Principal Place of Business:**801 MARQUETTE AVENUE  
MINNEAPOLIS, MN 55402**Current Mailing Address:**200 LAKE EAST EAST  
MAIL CODE EX0-0-1-A, STEPHANIE BOAEUF  
WAYZATA, MN 55391 US**FEI Number:** 41-1474691**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**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name NYQUIST, MARK D.  
Address 801 MARQUETTE AVENUE  
City-State-Zip: MINNEAPOLIS MN 55402

Title VP  
Name FIRSCH, RICHARD J  
Address 801 MARQUETTE AVENUE  
City-State-Zip: MINNEAPOLIS MN 55402

Title SECRETARY  
Name GREEN, JOSEPH T  
Address 200 LAKE STREET EAST  
City-State-Zip: WAYZATA MN 55391

Title TREASURER  
Name JONES, MICHAEL S  
Address 200 LAKE STREET EAST  
City-State-Zip: WAYZATA MN 55391

Title DIRECTOR, SENIOR VICE PRESIDENT  
Name HENRY, ROBERT A  
Address 17440 COLLEGE PARKWAY  
City-State-Zip: LIVONIA MI 48152

Title SENIOR VICE PRESIDENT  
Name KROGMAN, MARTIN J  
Address 801 MARQUETTE AVENUE  
City-State-Zip: MINNEAPOLIS MN 55402

Title DIRECTOR  
Name GUNSTAD, BRADLEY C.  
Address 11100 WAYZATA BLVD, STE 801  
City-State-Zip: MINNETONKA MN 55305

Title ASST. TREASURER  
Name BODE, SUSAN D.  
Address 150 LAKE STREET WEST  
City-State-Zip: WAYZATA MN 55391

**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 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****SECRETARY****02/04/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title	VP
Name	VEURINK, DAVID J.
Address	800 BURR RIDGE PARKWAY
City-State-Zip:	BURR RIDGE IL 60527