

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03000005526

**Entity Name:** TCF REAL ESTATE MANAGEMENT CORPORATION**Current Principal Place of Business:**1405 XENIUM LANE. N.  
PLYMOUTH, MN 55441**Current Mailing Address:**200 LAKE STREET EAST  
MAIL CODE EX0-01-A, THOMAS RYAN  
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	11100 WAYZATA BLVD. STE 800
City-State-Zip:	MINNETONKA MN 55305

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

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

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

Title	ASST. TREASURER
Name	BODE, SUSAN D.
Address	1405 XENIUM LANE N. PCC-2C-C
City-State-Zip:	PLYMOUTH MN 55441

Title	ASSISTANT SECRETARY
Name	SMITH, NICHOLAS C.
Address	200 LAKE STREET E.
City-State-Zip:	WAYZATA MN 55391

Title	VP
Name	GOTTWALT, THOMAS
Address	11100 WAYZATA BLVD.
City-State-Zip:	MINNETONKA MN 55305

*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:** NICHOLAS SMITH**ASSISTANT SECRETARY** 04/30/2019\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date