


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90548 048 ***150.00

DOCUMENT # P00542 1. Entity Name TCF MORTGAGE CORPORATION					
Principal Place of Business 801 MARQUETTE AVE. MINNEAPOLIS, MN 55402			Mailing Address 801 MARQUETTE AVE. MINNEAPOLIS, MN 55402		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 41-1437052	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NAGORSKE, LYNN A 801 MARQUETTE AVE SO MINNEAPOLIS, MN	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP DINNDORF, DOUGLAS 801 MARQUETTE AVE MINNEAPOLIS, MN 55402	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Dirndorf, Douglas 801 Marquette Ave Minneapolis, MN 55402	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP SCHIRMERS, CAROL 801 MARQUETTE AVE MINNEAPOLIS, MN 55402	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP WILLIAMSON, JEFFREY 801 MARQUETTE AVE MINNEAPOLIS, MN 55402	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Broucek, James 801 Marquette Ave Minneapolis, MN 55402	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, NEIL W 801 MARQUETTE AVENUE MINNEAPOLIS, MN 55402	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP HUGHES, PAULA 801 MARQUETTE AVE MINNEAPOLIS, MN	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Green, Joseph 801 Marquette Ave Minneapolis, MN 55402	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4/11/05 <small>Date</small>		
Douglas L. Dinndorf, President			612-661-8781 <small>Daytime Phone #</small>		

20035453



04112005 Chg-P CR2E034 (10/03)

ATTACHMENT

P00542/20035453

TCFMC Directors and Officers	
04/11/05	
<u>Name</u>	<u>Title</u>
Neil W. Brown	Director - Chairman
Lynn A. Nagorske	Director
Douglas L. Dinndorf	Director
David M. Stautz	Director
Douglas L. Dinndorf	President
Carol B. Schirmers	Sr. Vice President/Controller
Joseph T. Green	Secretary
James S. Broucek	Treasurer
David M. Stautz	Assistant Treasurer
Juanita M. Kniefel	Vice President
Faye R. Erickson	Vice President
Debra A. Hanson	Vice President
Paul A. McColley	Vice President
Theresea S. Frost	Vice President/Assistant Controller
Catherine A. Peterson	Vice President
Kathleen A. Nystrom	Vice President
Janean M. Berggren	Loan Administration Officer
Debra J. McCloskey	Loan Administration Officer
Alan Auzins	Loan Administration Officer
Kathy Sutton	Loan Administration Officer
Patricia A. Carrow	Mortgage Document Officer
Stephen W. Sinner	Mortgage Document Officer
Mark W. Rohde	Mortgage Document Officer
<u>The work address for all of the above is:</u>	
801 Marquette Avenue	
Minneapolis, MN 55402.	
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