

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 28 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P20067 (5)
1. Corporation Name
TCF ASSET MANAGEMENT CORPORATION

Principal Place of Business
TWO CONTINENTAL TOWERS, 1701 GOLF ROAD
SUITE 500
ROLLING MEADOWS IL 60008
US

Mailing Address
TWO CONTINENTAL TOWERS, 1701 GOLF ROAD
SUITE 500
ROLLING MEADOWS IL 60008
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		07/15/1988	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		84-0642550	
24 Country		30 Country		Applied For	
				Not Applicable	
				5. Certificate of Status Desired	
				<input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			
				FL			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	EVPD	<input type="checkbox"/> DELETE		1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SCHOEDINGER, JAMES L.			1.2 NAME	Please See Attached List		
STREET ADDRESS	TWO CONTINENTAL TOWERS, 1701 GOLF RD.			1.3 STREET ADDRESS			
CITY-ST-ZIP	ROLLING MEADOWS IL			1.4 CITY-ST-ZIP			
TITLE	AS	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	REYNOLDS, ROSALIE			2.2 NAME			
STREET ADDRESS	TWO CONTINENTAL TOWERS, 1701 GOLF RD.			2.3 STREET ADDRESS			
CITY-ST-ZIP	ROLLING MEADOWS IL			2.4 CITY-ST-ZIP			
TITLE	VPGC	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WENDT, DEBRA			3.2 NAME			
STREET ADDRESS	TWO CONTINENTAL TOWERS, 1701 GOLF ROAD			3.3 STREET ADDRESS			
CITY-ST-ZIP	ROLLING MEADOWS IL			3.4 CITY-ST-ZIP			
TITLE	VP	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MOHR, JOHN J			4.2 NAME			
STREET ADDRESS	TWO CONTINENTAL TOWERS, 1701 GOLF ROAD			4.3 STREET ADDRESS			
CITY-ST-ZIP	ROLLING MEADOWS IL			4.4 CITY-ST-ZIP			
TITLE	VPC	<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PERRELLI, ROSARIO A			5.2 NAME			
STREET ADDRESS	TWO CONTINENTAL TOWERS, 1701 GOLF ROAD			5.3 STREET ADDRESS			
CITY-ST-ZIP	ROLLING MEADOWS IL			5.4 CITY-ST-ZIP			
TITLE	D	<input checked="" type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	READ, STEVEN A			6.2 NAME			
STREET ADDRESS	9399 WEST HIGGINS ROAD, SUITE 600			6.3 STREET ADDRESS			
CITY-ST-ZIP	ROSEMONT IL			6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

Rosalie Reynolds

CR2E034 (10/97)

TCF ASSET MANAGEMENT CORPORATION

OFFICERS

Name	Office	Bus. Address	City, State, Zip
Keith A. Van Damme	President and Chief Executive Officer	1933 North Meacham Road	Schaumburg, Illinois 60173
Rosario A. Perrelli	Senior Vice President and Chief Financial Officer	Two Continental Towers, 1701 Golf Road	Rolling Meadows, IL 60008
Debra Wendt	Vice President, Secretary & General Counsel	Two Continental Towers, 1701 Golf Road	Rolling Meadows, IL 60008
John J. Mohr	Vice President - Tax	Two Continental Towers, 1701 Golf Road	Rolling Meadows, IL 60008
Craig Hebertson	Assistant Secretary	Two Continental Towers, 1701 Golf Road	Rolling Meadows, IL 60008
Rosalie M. Reynolds	Assistant Secretary	Two Continental Towers, 1701 Golf Road	Rolling Meadows, IL 60008

DIRECTORS

Rosario A. Perrelli	Two Continental Towers, 1701 Golf Road	Rolling Meadows, IL 60008
James L. Schroedinger	Two Continental Towers, 1701 Golf Road	Rolling Meadows, IL 60008
Keith A. Van Damme	1933 North Meacham Road	Schaumburg, Illinois 60173