2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20067

Entity Name: TCF ASSET MANAGEMENT CORPORATION

FILED May 01, 2008 Secretary of State

Current Dringing Blood of Business			New Principal Place of Business:	
Current Principal Place of Business:			New Fillici	ipai Flace of Busiliess.
1900 E GOLF ROAD, M-100 SCHAUMBURG, IL 60173 US				
Current Mailing Address:			New Mailir	ng Address:
1900 E GOLF ROAD, M-100 SCHAUMBURG, IL 60173 US				
FEI Number: 8	84-0642550 FE	El Number Applied For () FEI Num	nber Not Appli	icable () Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
CT CORPORATION SYSTEM 1200 S. 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				
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	P () Dele VAN DAMME, KEITH 1900 EAST GOLF R SCHAUMBURG, IL (A OAD, SUITE M100	Title: Name: Address: City-St-Zip:	P (X) Change () Addition VAN DAMME, KEITH 1900 EAST GOLF ROAD, SUITE M100 SCHAUMBURG, IL 60173 US
Title: Name: Address: City-St-Zip:	S () Dele KRAKOWSKI, MARY 1900 EAST GOLF R SCHAUMBURG, IL	′ F OAD, SUITE M100	Title: Name: Address: City-St-Zip:	S (X) Change () Addition KRAKOWSKI, MARY 1900 EAST GOLF ROAD, SUITE M100 SCHAUMBURG, IL 60173 US
Title: Name: Address: City-St-Zip:	D () Dele BEARDSWORTH, JA 4333 EDGEWOOD F CEDAR RAPIDS, IA	AMES A RD., NW	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Dele SCHNEIDER, ARTHU 4333 EDGEWOOD F CEDAR RAPIDS, IA	JR C RD., NW	Title: Name: Address: City-St-Zip:	D (X) Change () Addition SCHNEIDER, ARTHUR 4333 EDGEWOOD RD., NW CEDAR RAPIDS, IA 52499 US
Title: Name: Address: City-St-Zip:	D () Dele VERMIE, CRAIG D 4333 EDGEWOOD F CEDAR RAPIDS, IA	RD., NW	Title: Name: Address: City-St-Zip:	D (X) Change () Addition VERMIE, CRAIG 4333 EDGEWOOD RD., NW CEDAR RAPIDS, IA 52499 US
Title: Name: Address: City-St-Zip:	V () Dele PEIFER, THOMAS C 4333 EDGEWOOD F CEDAR RAPIDS, IA	r RD., NW	Title: Name: Address: City-St-Zip:	V (X) Change () Addition PEIFER, THOMAS 4333 EDGEWOOD RD., NW CEDAR RAPIDS, IA 52499 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS PEIFER V 05/01/2008