2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S99694

Entity Name: TCW DEVELOPMENT CORP.

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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ATTN. FINANCIAL SERVICES 400 SECOND AVE S MINNEAPOLIS, MN 55401

Current Mailing Address: New Mailing Address:

ATTN. FINANCIAL SERVICES
400 SECOND AVE S
MINNEAPOLIS, MN 55401

ATTN. FINANCIAL SERVICES
400 SECOND AVE S
MINNEAPOLIS, MN 55401

US

FEI Number: 41-1712761 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PIERCE, SCOTT OLD REPUBLIC NATIONAL TITLE INSURANCE CO 100 S ASHLEY DR, SUITE 700 TAMPA, FL 330625300 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:

City-St-Zip:

BURNSVILLE, MN

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

BURNSVILLE, MN 553065055 US

Title: () Delete Title: (X) Change () Addition MUELLER, MICHAEL G MUELLER, MICHAEL G Name: Name: 9569 YORKSHIRE LANE 9569 YORKSHIRE LANE Address: Address: City-St-Zip: EDEN PRAIRIE, MN City-St-Zip: EDEN PRAIRIE, MN 553472734 US

Title: AS () Delete Title: AS (X) Change () Addition Name: HAVISTO, KRISTEN Name: HAVISTO, KRISTEN

 Name:
 HAVISTO, KRISTEN

 Address:
 5458 ORCHARD AVE N

 City-St-Zip:
 CRYSTAL, MN

 City-St-Zip:
 CRYSTAL, MN

 55458 ORCHARD AVE N
 City-St-Zip:

 CRYSTAL, MN
 CITY-ST-Zip:

 $\label{eq:title:S} {\sf Title:} \qquad {\sf S} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad {\sf (X) Change () Addition}$

 Name:
 DAN, WOLD
 Name:
 WOLD, DANIEL M

 Address:
 4657 ISLAND VIEW DRIVE
 Address:
 4657 ISLAND VIEW DRIVE

 City-St-Zip:
 MOUND, MN
 553649388 US

Title: VPTD () Delete Title: VPTD (X) Change () Addition Name: CLEAVELAND, J B, Name: CLEAVELAND, JOHN B

 Address:
 19661 HUDSON CIRCLE
 Address:
 19661 HUDSON CIRCLE

 City-St-Zip:
 ELK RIVER, MN
 City-St-Zip:
 ELK RIVER, MN
 553301805 US

 $\label{eq:title:title:vp} \textit{Title:} \qquad \textit{VP} \qquad \textit{() Delete} \qquad \qquad \textit{Title:} \qquad \textit{VP} \qquad \textit{(X) Change () Addition}$

Name: PIERCE, S, Name: PIERCE, SCOTT
Address: 15101 GREENHORN WAY Address: 15101 GREENHORN WAY

City-St-Zip: TAMPA, FL City-St-Zip: TAMPA, FL 336251608 US

Title: VP () Delete Title: VP (X) Change () Addition Name: CHIPINSKI, ROBERT L Name: CHIPINSKI, ROBERT L Address: 14813 WILLIAMSBURG CURVE 14813 WILLIAMSBURG CURVE

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: MICHAEL G MUELLER AT 04/27/2006