2005 LIMITED LIABILITY COMPANY

Country O2116   Country USA   60606   USA   S. Certificate of Status Desired   \$5.00 Addition Fee Required	
2. Principal Place of Business Four Copley Place Suite, Apt. #, etc. Suite, Apt. #, et	
Four Copley Place   C/o Chris Antonow   Suite, Apt. 4, etc.   Suit	
Suite 4602	
Boston; MA  Chicago, IL  Zip O20116  Country USA  60606  USA  5. Certificate of Status Desired For Required F	
O2116  USA 60606 USA 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent Name  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525  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 the obligations of registered agent.  SIGNATURE  Filing Fee is \$50.00 Due by May 1, 2005  9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES  ITTLE NAME GUGGENHEIM PLUS LEVERAGED LLC SIRRET ADDRESS CITY-ST-ZIP WINCHESTER, MA 01890  ITTLE NAME SIRRET ADDRESS CITY-ST-ZIP Delete  ITTLE NAME SIRRET ADDRESS CITY-ST-ZIP  Delete TITLE NAME SIRRET ADDRESS SIRRET	d For oplicable
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Sireet Address (P.O. Box Number is Not Acceptable)  Sireet Address (P.O. Box Number is Not Acceptable)  Sireet 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 agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent.  SIGNATURE  Signature, hyper or printed name of registered agent and the ff applicable. (NOTE Registered Agent signature required when minutating)  Part  Filling Foe is \$50.00  Due by May 1, 2005  9. MANAGING MEMBERS/MANAGERS  III. MGRM  GUGGENHEIM PLUS LEVERAGED LLC  SIREET ADDRESS  GIV-ST-ZP  WINCHESTER, MA 01890  Delete  TITLE  MARE  SIREET ADDRESS  GITY-ST-ZP  Delete  TITLE  Delete  TITLE  Delete  SIREET ADDRESS  GITY-ST-ZP  Change  SIREET ADDRESS  SIREET ADDRES	
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent.  SIGNATURE    Signature   Si	
THE MAKE SIRET ADDRESS THE NAME STREET ADDRESS SIGNATURE  Signature. Typed or printed meme of registered agent and title if applicable.  (NOTE: Registered Agent adjusture required when reinstating)  DATE  Mâks: check payable to Florida Bepartment of State  Florida Bepartment o	
Filing Fee is \$50.00  Due by May 1, 2005  MANAGING MEMBERS/MANAGERS  TITLE  MGRM  GUGGENHEIM PLUS LEVERAGED LLC  SIREET ADDRESS  CITY-ST-ZIP  NAME  SIREET ADDRESS  SIREET ADDRESS  CITY-ST-ZIP  NAME  SIREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  SIREET ADDRESS  SIREET ADDRESS  CITY-ST-ZIP  NAME  SIREET ADDRESS  SIREET ADDRESS  CITY-ST-ZIP  NAME  SIREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  SIREET ADDRESS  CITY-ST-ZIP  NAME  SIREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  SIREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  SIREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  SIREET ADDRESS  SIREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  SIREET ADDRESS  SI	accept
### Piling Fee is \$50.00   Due by May 1, 2005    Second Description	—
TITLE MGRM Delete TITLE MGRM GUGGENHEIM PLUS LEVERAGED LLC SIREET ADDRESS CITY-ST-ZIP WINCHESTER, MA 01890 CITY-ST-ZIP Boston, MA 02116  TITLE NAME SIREET ADDRESS CITY-ST-ZIP  TITLE MGRM GUGGENHEIM Plus Leveraged LLC SIREET ADDRESS Four Copley Place, Suite 4602 CITY-ST-ZIP Boston, MA 02116  Change Change CITY-ST-ZIP  TITLE NAME SIREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS SIREET ADDRE	
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11. 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 inform indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of t limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.  Guggenheim Plus Leveraged LLC, by Guggenheim Trust Company LLC, its Manager  By Brian T. Sir, its Manager  SIGNATURE:  03/31/05 (312) 827-0100	nation the

(312) 827-0100

## M03000003962

ACCOUNT NO. : 07210000032

REFERENCE: 313027 4329943

AUTHORIZATION

COST LIMIT : \$ 50.00

ORDER DATE: April 13, 2005

ORDER TIME : 9:10 AM

ORDER NO. : 313027-020

CUSTOMER NO: 4329943

CUSTOMER: Ms. Bonnie Glass

Schuyler Roche & Zwirner 130 East Randolph Street One Prudential Plaza, #3800

Chicago, IL 60601

## ANNUAL REPORT FILING

NAME:

GRE STIC LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - Ext. 2955

EXAMINER'S INITIALS: