

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

2006 MAR -7 AM 9:44
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M03000003962

1. Entity Name
GRE STIC LLC



Principal Place of Business
FOUR COPLEY PLACE, SUITE 4602
BOSTON, MA 02116

Mailing Address
C/O CHRIS ANTONOW
227 WEST MONROE STREET, S-4800
CHICAGO, IL 60606

2. Principal Place of Business
Four Copley Place
Suite, Apt. #, etc.
Suite 4403
City & State
Boston, MA
Zip
02116

3. Mailing Address
c/o Richard E. Michaels
Suite, Apt. #, etc.
130 E. Randolph St., S-3800
City & State
Chicago, IL
Zip
60601

Country
USA

5000673450800



02022006 Chg-LLC CR2E083 (11/05)

4. FEI Number
20-0424287

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

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 _____ (NOT: Registered Agent signature required when cancelling) DATE _____

Filing Fee Is \$50.00
Due by May 1, 2006

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGRM GUGGENHEIM PLUS LEVERAGED LLC FOUR COPLEY PLACE, SUITE 4602 BOSTON, MA 02116	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Four Copley Place, Suite 4403 Boston, MA 02116	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information contained 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 the Limited Liability Company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Guggenheim PLUS Leveraged LLC, its Member, by Guggenheim Trust Company LLC, its MGR,
by Brian T. Sir, its MGR

SIGNATURE:  3/7/06 (312) 827-0100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Day Month Year



CORPORATION SERVICE COMPANY

M03000003962

ACCOUNT NO. : 072100000032

REFERENCE : 905755 4329943

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 50.00

ORDER DATE : March 7, 2006

ORDER TIME : 3:09 PM

ORDER NO. : 905755-025

CUSTOMER NO: 4329943

BK

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: Darlene Ward - Ext. 2935

EXAMINER'S INITIALS: _____

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