2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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1. Entity Name GRE STIC LLC

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Principal Place of Business

FOUR COPLEY PLACE, SUITE 4403 BOSTON, MA 02116

Mailing Address

C/O RICHARD E. MICHAELS 130 E. RANDOLPH STREET, S-3800 CHICAGO, IL 60601



03252008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-0424287

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

CORPORATION SERVICE COMPANY

1201 HAYS STREET TALLAHASSEE, FL 32301-2525



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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, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

900123593539

MANAGING MEMBERS/MANAGERS 9. TITLE GUGGENHEIM PLUS LEVERAGED LLC MAME FOUR COPLEY PLACE, SUITE 4403 STREET ADDRESS **BOSTON, MA 02116** CITY-ST-7IP TITLE NALE STREET ADORESS CITY-ST-ZIP TITLE STREET ADDRESS ERRYMERONGE CITY-ST-ZIP TITLE National Particular (National NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 LNC, its Member by Guggenheim Trust Company LLC, its Manager, by Brian T. Sir, is Manager SIGNATURE: (312) 827-0100

NTEU NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #

ACCOUNT NO. : 072100000032

REFERENCE

COST LIMIT

138.75

ORDER DATE: April 15, 2008

ORDER TIME: 3:53 PM

ORDER NO. : 529657-005

CUSTOMER NO: 4329943

ANNUAL REPORT FILING

NAME: GRE STIC LLC

XX ___ ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

__ PLAIN STAMPED COPY

___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd - Ext. 2940

EXAMINER'S INITIALS