


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

<b>DOCUMENT # M02000000626</b> 1. Entity Name GRP LOAN, LLC	
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FILED

07 JAN -9 PM 1:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business 360 HAMILTON AVE. WHITE PLAINS, NY 10601	Mailing Address 360 HAMILTON AVE. WHITE PLAINS, NY 10601
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DO NOT WRITE IN THIS SPACE

01042007 No Chg-LLC	CR2E083 (11/05)
4. FEI Number 13-4076356	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

NATIONAL CORPORATE RESEARCH, LTD., INC.  
 515 E. PARK AVE.  
 TALLAHASSEE, FL 32301

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

Filing Fee is \$50.00  
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGRM
NAME	ANDREW, CHARLES
STREET ADDRESS	12061 BLUEMONT WAY
CITY-ST-ZIP	RESTON, VA 20190
TITLE	MGRM
NAME	WHORLEY, JOHN
STREET ADDRESS	12061 BLUEMONT WAY
CITY-ST-ZIP	RESTON, VA 20190
TITLE	MGRM
NAME	BOWDEN, NATALIE
STREET ADDRESS	360 HAMILTON AVE., 5TH FL
CITY-ST-ZIP	WHITE PLAINS, NY 10601
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

200084152082  
01/12/07--01015--015 \*\*50.00

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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 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.

SIGNATURE: *Kristin [unclear]* 1/5/07 (914) 397-7500