2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 24, 2009
Secretary of State

DOCUMENT# M03000001452

Entity Name: GLA REAL ESTATE HOLDINGS, LLC

Current Principal Place of Business:

3200 NW YEON
PORTLAND, OR 97210 US

New Principal Place of Business:

Current Mailing Address:

3200 NW YEON
PORTLAND, OR 97210 US

New Mailing Address:

FEI Number: 06-1689146 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	PNP COMMERCIAL ACQUI, SITION, LLC	
Address:	3200 NW YEON	
City-St-Zip:	PORTLAND, OR 97210 UA	
Title:	P	( ) Delete
Name:	KLAUER, THOMAS	
Address:	3200 NW YEON	
City-St-Zip:	PORTLAND, OR 97210 US	
Title:	VP	( ) Delete
Name:	HEISKELL, STEVEN	
Address:	3200 NW YEON	
City-St-Zip:	PORTLAND, OR 97210 US	
Title:	T	( ) Delete
Name:	MAUN, TOM	
Address:	3200 NW YEON	
City-St-Zip:	PORTLAND, OR 97210 US	
Title:	S	( ) Delete
Name:	JOSEPHSON, RICHARD C	
Address:	3200 NW YEON	
City-St-Zip:	PORTLAND, OR 97210 US	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

ADDITIONS/CHANGES:

Title:	MGRM	(X) Change ( ) Addition
Name:	NROPROP, INC.,	
Address:	3200 NW YEON	
City-St-Zip:	PORTLAND, OR 97210 UA	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	( ) Change (X) Addition
Name:	BETTENCOURT, RICHARD D	
Address:	3200 NW YEON	
City-St-Zip:	PORTLAND, OR 97210 US	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: RICHARD C. JOSEPHSON S 02/24/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date