

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M04000005245

FILED
Jul 30, 2007
Secretary of State**Entity Name:** HHC TRS LC PORTFOLIO LLC**Current Principal Place of Business:**8405 GREENSBORO DRIVE, SUITE 500
MCLEAN, VA 22102**New Principal Place of Business:**1650 TYSONS BLVD.
1600
MCLEAN, VA 22102**Current Mailing Address:**8405 GREENSBORO DRIVE, SUITE 500
MCLEAN, VA 22102**New Mailing Address:**1650 TYSONS BLVD.
1600
MCLEAN, VA 22102**FEI Number:** 20-0382323**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: MGR () Delete
Name: FRANCIS, JAMES L
Address: 8405 GREENSBORO DRIVE, SUITE 500
City-St-Zip: MCLEAN, VA 22102

Title: MGR () Delete
Name: VICARI, DOUGLAS W
Address: 8405 GREENSBORO DRIVE, SUITE 500
City-St-Zip: MCLEAN, VA 22102

Title: MGR () Delete
Name: COLDEN, TRACY M.J.
Address: 8405 GREENSBORO DRIVE, SUITE 500
City-St-Zip: MCLEAN, VA 22102

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PD (X) Change () Addition
Name: GILBERT, ALEXANDER P
Address: 1650 TYSONS BLVD., SUITE 1600
City-St-Zip: MCLEAN, VA 22102

Title: D (X) Change () Addition
Name: BUCKLEY, CIA
Address: 1650 TYSONS BLVD., SUITE 1600
City-St-Zip: MCLEAN, VA 22102

Title: VPD (X) Change () Addition
Name: SMITH, III, JAMES W
Address: 1650 TYSONS BLVD., SUITE 1600
City-St-Zip: MCLEAN, VA 22102

Title: VPCO () Change (X) Addition
Name: CHEN, DEVIN
Address: 1650 TYSONS BLVD., SUITE 1600
City-St-Zip: MCLEAN, VA 22102

Title: VPS () Change (X) Addition
Name: BEST, GERALD R
Address: 1650 TYSONS BLVD., SUITE 1600
City-St-Zip: MCLEAN, VA 22102

Title: VPAS () Change (X) Addition
Name: MCGILLIS, J. M
Address: 1650 TYSONS BLVD., SUITE 1600
City-St-Zip: MCLEAN, VA 22102

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: GERALD R. BEST

VPS

07/30/2007

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