

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M06000006164

1. Entity Name
GRE RED WILLOW GP LLC



Principal Place of Business
FOUR COPLEY PLACE, STE 4403
BOSTON, MA 02116

Mailing Address
FOUR COPLEY PLACE, STE 4403
BOSTON, MA 02116

2. Principal Place of Business - No P.O. Box #
Four Copley Place

3. Mailing Address
c/o Richard E. Michaels

Suite, Apt. #, etc.
Suite 4403

Suite, Apt. #, etc.
130 E. Randolph St., Suite 3800

City & State
Boston, MA

City & State
Chicago, IL

Zip
02116

Country

Zip
60601

Country

04052007 Chg-LLC CR2E083 (12/06)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

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

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

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

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
GUGGENHEIM PLUS LEVERAGED LLC
FOUR COPLEY PLACE, STE 4403
BOSTON, MA 02116 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Delete

TITLE
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CITY- ST- ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
Member
Guggenheim PLUS Leveraged LLC
Four Copley Place, Suite 4403
Boston, MA 02116 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
400096786794 ☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY- ST- 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 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.

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

April 12, 2007

Date

312-877-0100

Daytime Phone #

FILED
07 APR 13 AM 9:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK

