2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 06, 2005
Secretary of State

DOCUMENT# M02000000262

Entity Name: CROWN CASTLE SOUTH LLC

Current Principal Place of Business:

510 BERING DRIVE
SUITE 500
HOUSTON, TX 77057

New Principal Place of Business:

Current Mailing Address:

510 BERING DR
SUITE 500
HOUSTON, TX 77057

New Mailing Address:

FEI Number: 74-2913900 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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/MEMBERS:

Title: MGRM ( ) Delete
Name: CC SOUTH HOLDCO CORP, .
Address: 510 BERING DRIVE, STE. 500
City-St-Zip: HOUSTON, TX 77057

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

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

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR ( ) Change (X) Addition
Name: HAWK, BLAKE
Address: 510 BERING DRIVE, STE. 500
City-St-Zip: HOUSTON, TX 77057

Title: MGR ( ) Change (X) Addition
Name: MORELAND, BEN
Address: 510 BERING DRIVE, STE. 500
City-St-Zip: HOUSTON, TX 77057

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SUSAN DIANE KOONTZ, SECRETARY OF MEMBER M-S 04/06/2005

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