


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 14, 2007 08:00 AM
Secretary of State

DOCUMENT # M00000000119 1. Entity Name CROWN CASTLE GT COMPANY LLC	
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Principal Place of Business 510 BERING DRIVE SUITE 600 HOUSTON, TX 77057	Mailing Address 510 BERING DRIVE SUITE 600 HOUSTON, TX 77057
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DO NOT WRITE IN THIS SPACE



02072007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 76-0627250	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

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.

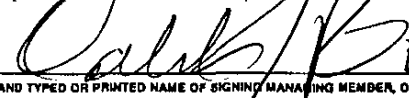
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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Filing Fee is \$50.00 Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BROWN, JAY 510 BERING DRIVE, SUITE 600 HOUSTON, TX 77057
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP HAWK, E. BLAKE 510 BERING DRIVE, SUITE 600 HOUSTON, TX 77057
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO KELLY, JOHN P 2000 CORPORATE DRIVE CANONSBURG, PA 15317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO MORELAND, W. BENJAMIN 510 BERING DRIVE, SUITE 600 HOUSTON, TX 77057
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S REID, DONALD J JR. 510 BERING DRIVE, SUITE 600 HOUSTON, TX 77057
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P YOUNG, JAMES 2000 CORPORATE DRIVE CANONSBURG, P 15317

<p>U00000635841 02/23/07-80031-002 50.00</p> <p>DO NOT WRITE IN THIS SPACE</p>

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:  DONALD J. REID, JR.	713-570-3000
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date Daytime Phone #</small>