

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004178

Entity Name: CROWN CASTLE ORLANDO CORP.**Current Principal Place of Business:**1220 AUGUSTA DRIVE
SUITE 600
HOUSTON, TX 77057**Current Mailing Address:**1220 AUGUSTA DRIVE
SUITE 600
HOUSTON, TX 77057 US**FEI Number:** 41-2105151**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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**Officer/Director Detail :****Title** DIRECTOR, EXECUTIVE VICE
PRESIDENT**Name** HAWK, E. BLAKE**Address** 1220 AUGUSTA DRIVE
SUITE 600**City-State-Zip:** HOUSTON TX 77057**Title** DIRECTOR, PRESIDENT AND CHIEF
EXECUTIVE OFFICER**Name** MORELAND, W. BENJAMIN**Address** 1220 AUGUSTA DRIVE
SUITE 600**City-State-Zip:** HOUSTON TX 77057**Title** ASSISTANT SECRETARY**Name** HOWELL, LYNN**Address** 1220 AUGUSTA DRIVE
SUITE 600**City-State-Zip:** HOUSTON TX 77057**Title** DIRECTOR, SENIOR VICE
PRESIDENT, CHIEF FINANCIAL
OFFICER AND TREASURER**Name** BROWN, JAY**Address** 1220 AUGUSTA DRIVE
SUITE 600**City-State-Zip:** HOUSTON TX 77057**Title** SECRETARY**Name** REID, DONALD J**Address** 1220 AUGUSTA DRIVE
SUITE 600**City-State-Zip:** HOUSTON TX 77057**Title** SENIOR VICE PRESIDENT AND CHIEF
OPERATING OFFICER**Name** YOUNG, JIM**Address** 2000 CORPORATE DRIVE**City-State-Zip:** CANONSBURG PA 15317**Title** VICE PRESIDENT - CORPORATE TAX**Name** BONE, THOMAS**Address** 2000 CORPORATE DRIVE**City-State-Zip:** CANONSBURG PA 15317

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LYNN HOWELL**ASSISTANT SECRETARY** 04/30/2014_____
Electronic Signature of Signing Officer/Director Detail_____
Date