2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006698

Entity Name: CROWN CASTLE SOLUTIONS CORP.

FILED Feb 11, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:	
1220 AUGL SUITE 500 HOUSTON	JSTA DRIVE , TX 77057			
Current Mailing Address: New Mailing Address:				
1220 AUGUSTA DRIVE SUITE 500 HOUSTON, TX 77057				
FEI Number:	74-3025586	FEI Number Applied For () FEI Num	nber Not Appli	cable () Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New 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				
Election Campaign Financing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES () E YOUNG, JAMES 2000 CORPORA CANONSURG, PA		Title: Name: Address: City-St-Zip:	DPRE (X) Change () Addition MORELAND, W. BENJAMIN 1220 AUGUSTA DR. SUITE 500 HOUSTON, TX 77057
Title: Name: Address: City-St-Zip:	HAWK, E. BLAKE	DRIVE, SUITE 500	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MORELAND, W.	DRIVE, SUITE 500	Title: Name: Address: City-St-Zip:	AST (X) Change () Addition HOWELL, LYNN 1220 AUGUSTA DRIVE, SUITE 500 HOUSTON, TX 77057
Title: Name: Address: City-St-Zip:	BROWN, JAY	Delete DRIVE, SUITE 500 7057	Title: Name: Address: City-St-Zip:	DCFO (X) Change () Addition BROWN, JAY 1220 AUGUSTA DRIVE, SUITE 500 HOUSTON, TX 77057
Title: Name: Address: City-St-Zip:	REID, DONALD J	DRIVE, SUITE 500	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DCEO () E KELLY, JOHN P 2000 CORPORA CANONSBURG, F		Title: Name: Address: City-St-Zip:	EVC (X) Change () Addition KELLY, JOHN P 2000 CORPORATE DRIVE CANONSBURG, PA 15317

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 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 an address, with all other like empowered.

SIGNATURE: LYNN HOWELL AST 02/11/2009