.2001 UNIFORM BUSINESS REPORT (UBR)

	I UNIFORM BUSI	NESS REPU	7010	(0011)						
DOCUMENT # 19500002400										
ATC Tower Services, Inc.										
						01 APR 30 PM 1:49				
Principal Place of Business Mailing Address					SECRETARY OF STATE					
116 Huntington Avenue 116 Huntington Av Boston, MA 02116 Boston, MA 02116				nue		SECRETARY OF STATE TALLAHASSEE, FLORIDA				•
			-		-					
Principal Place of Business										
	ntington Avenue	116 Huntington Avenue								
Suite, Apt. 11th fl		Suite, Apt. #. etc. 11th floor				DO NOT WRITE IN THIS SPACE				
City & Sta	ate	City & State				FEI Number		A	pplied For	
Boston, Zip	, MA Country	Boston, MA	try	\$9.75 Additional			lot Applicable	4		
02116	Country	02116	Coun	ury	5. (	Certificate of Status Desired		<b>&gt;8./⊅</b> Ad ee Require		
	6. Name and Address of Current R	legistered Agent		Name	7. 1	Name and Address of New R	egistered A	gent		]
Corporation Service Company										_
1201 Hays Street Tallahassee, FL 32301				Street Address (P.O. Box Number is Not Acceptable)						
									· —- —-,	
				City			FL	Zip Cod	ie .	7
8. The above	e named entity submits this statement for	the purpose of changing its	registere	ed office or regi	stered ag	ent, or both, in the State of Flo	rida.	·L		7
										}
SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE	: Registered	d Agent signature rec	uired when re	instaling)	DATE			
9 This corp.	oration is eligible to satisfy its Intangible	FILE NOW!	HEFF	IS \$150.00		Γ				1
Tax filling requirement and elects to do so. After MAY 1, 2001 Fee.						10: Election Campaign Fina Trust Fund Contribution			00 May Be d to Fees	
	eria on back)  OFFICERS AND D	AND A SECURE OF SECURE AND ASSESSED.	de la maria de la companya della com	partment of	talk the second	DITIONS (CLIANGES TO OFFI	OFFIC AND	DIDECTOR	IC IN 44	1
11.	President & Director	Delete	12. TITLE			DITIONS/CHANGES TO OFFI	<del></del>	Change	Addition	lg
NAME	Peter Sandore		NAME							=======================================
STREET ADDRESS CITY-ST-ZIP	116 Huntington Ave., Boston MA 02116			ST-ZIP						8
TITLE	Vice President & Direc	ctor Delete	TITLE			<del> </del>	<u> </u>	☐ Change	☐ Addition	CR2E034 (11/00)
NAME	Justin D. Benincasa		NAME	l l		; 1 <b>Q</b>	, <b>3</b>	, t		
STREET ADDRESS CITY-ST-ZIP	116 Huntington Ave., Boston, MA 02116		1	ST-ZIP		11.				
TITLE	Secretary and VP	Delete	TITLE					☐ Change	Addition	1
NAME ·	Jonathan R. Black		NAME							1
STREET ADDRESS CITY-ST-ZIP	116 Huntington Ave., Boston, MA 02116			ST-ZIP						1
TITLE	Treasurer, CFO & Direc	tor Defete	TITLE		·			☐ Change	☐ Addition	1
NAME	Joseph L. Winn		NAME							
STREET ADDRESS CITY-ST-ZIP	116 Huntington Avenue   Boston, MA 02116		•	ST-ZIP						ĺ
TITLE	COO & Director	☐ Delete	TITLE	<del></del>				Change	Addition	
NAME STREET ADDRESS	Douglas C. Wiest 116 Huntington Avenue		NAME					-		
CITY-ST-ZIP	Boston, MA 02116			T ADDRESS ST-ZIP						
TITLE	Director	☐ Delete	TITLE					Change	Addition	1
NAME CIRCL ADORESE	Steven B. Dodge		NAME			40000	<b>04</b> 03	914	34-	L.
STREET ADORESS CITY-ST-ZIP	116 Huntington Avenue Boston, MA 02116			T ADDRESS ST-ZIP		)		_	-	~
13. I hereby c	pertify that the information supplied with the on this report or supplemental report is tr	nis filing does not qualify for	the exen	nption stated in	Section 1	119.07(3)(i), Florida Statutes, I	further certif	y that the in	ntormation or director	
of the corp	poration or the receiver or trustee empow or on an attachment with an admission with	rered to execute this report a	as require	ed by Chapter	607, Florid	da Statutes; and that my name	appears in E	Block 11 or	Block 12 if	Ì
		11/				Anwil 04	2001 61	7 275	7500	
SIGNAT		NTED NAME OF SIGNING OFFICER O	OR DIRECTO	OR .		April 24,		time Phone #	- / 500	
	1 7	\				<del></del>	201			1



ACCOUNT NO. : 072100000032

REFERENCE

131664

4389224

AUTHORIZATION :

COST LIMIT : \$ 150.00

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ORDER DATE: April 27, 2001

ORDER TIME : 10:41 AM

ORDER NO. : 131664-035

CUSTOMER NO: 4389224

CUSTOMER: Ms. Kathleen A. Quinn

American Tower Corporation

116 Huntington Avenue

11th Floor

Boston, MA 02116

ANNUAL REPORT FILING

NAME: ATC TOWER SERVICES, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder - Ext. 1118

EXAMINER'S INITIALS: