

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # F95000003531

1. Entity Name
AMERICAN TOWERS, INC.



Principal Place of Business
116 HUNTINGTON AVE.
11TH FLOOR
BOSTON, MA 02116

Mailing Address
116 HUNTINGTON AVE.
11TH FLOOR
BOSTON, MA 02116



01092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0598206

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DCEO
NAME	TAICLET, JAMES
STREET ADDRESS	116 HUNTINGTON AVE.
CITY-ST-ZIP	BOSTON, MA 02116
TITLE	DCFO
NAME	SINGER, BRADLEY E T
STREET ADDRESS	116 HUNTINGTON AVE.
CITY-ST-ZIP	BOSTON, MA 02116
TITLE	DVS
NAME	HESS, WILLIAM H
STREET ADDRESS	116 HUNTINGTON AVE
CITY-ST-ZIP	BOSTON, MA 02116
TITLE	VAS
NAME	MILSON, MICHAEL B
STREET ADDRESS	116 HUNTINGTON AVE
CITY-ST-ZIP	BOSTON, MA 02116
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/25/06 80046-008 150.00

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IN THIS SPACE**

12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael B. Milson

1/9/2006

617 375-7500

Date

Daytime Phone #