2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 26, 2004 8:00 am Secretary of State 04-26-2004 90526 027 ***150.00 DOCUMENT # F97000006543 SPECTRASITE COMMUNICATIONS, INC. 04041074 Principal Place of Business Mailing Address 100 REGENCY FOREST DRIVE 100 REGENCY FOREST DRIVE **SUITE 400** SUITE 400 CARY, NC 27511 CARY, NC 27511 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04202004 Chg-P CR2E034 (10/03) Applied For City & State 4. FEI Number City & State Not Applicable 56-2011640 _Country . . Zip -----\$8.75 Additional _ Zip_ 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORTION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 Zip Code 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. 1 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 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Delete D Change ■ Addition TITLE TITLE Stephen H. Clark CLARK, STEPHEN H NAME NAME 100 Regency Forest DR STREET ADDRESS 100 REGENCY FOREST DR STREET ADDRESS CARY, NC 27511 CITY-ST-ZIP CITY-ST-ZIP CFO Change Addition. **X** Delete TITLE TITLE Dale A. Carey TOMICK, DAVID P NAME Forest DR 100 Regences 100 REGENCY FOREST DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CARY, NC 27511 CITY-ST-ZIP COO ☐ Change Addition Delete. James S. Felman BILTZ, TIMOTHY G NAME NAME 100 Regency Forest DR STREET ADDRESS 100 REGENCY FOREST DRIVE STREET ADDRESS CITY-ST-ZIP **CARY, NC 27511** CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITI F TITLE GONZALEZ, GABRIELA NAME 100 REGENCY FOREST DRIVE STREET ADDRESS STREET ADDRESS CARY, NC 27511 CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE LYNCH, JOHN H NAME 100 REGENCY FOREST DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CARY, NC 27511 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE LILLY, STEVEN C NAME NAME 100 REGENCY FOREST DRIVE STREET ADDRESS STREET ADDRESS CARY, NC 27511 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Rorida 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: James S. Felman

SIGNATURE AND TYPED OR PRINTED NAME O

FILED