2001 UNIFORM BUSINESS REPORT (UBR)

| | | | | <u> </u> | | | | | | |
|--|---|---------------------------------|-----------------------|--|---|--------------------------------|----------------|-----------------------|-----------------|--|
| DOCUMENT #F980000296 | | | | | FILED | | | | | |
| OmniAmerica Holdings Corporation | | | | | 01 APR 30 PM 2: 10 | | | | | |
| | | | | | | | | | | |
| Pracipal Place of Business Mailing Address | | | | | SECRETARY OF STATE | | | | | |
| 116 Huntington Avenue 116 Huntington Avenue Boston, MA 02116 Boston, MA 02116 | | | iue | SECRETARY OF STATE TALLAHASSEE. FLORIDA | | | | | | |
| | | | • | | | | | | | |
| Principal Place of Business 3. Mailing Address | | | | | | | | | | |
| | tington Avenue | _ | 116 Huntington Avenue | | | | | | | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | DO NOT WRITE IN THIS SPACE | | | | | | |
| 11th f1 City & Stat | | 11th floor City & State | | | 4. FEI Number | | | pplied For | 1 | |
| Boston, | | Boston, MA | | | 75-2730645 | | | ot Applicable | 1 | |
| Zip Country | | Zip Coun | | iry | 5. Certificate of Status | s Desired | \$8.75 Ad | | 1 | |
| 02116 | | 02116 | <u>L</u> | | <u></u> | | Fee Require | ed | 1 | |
| 6. Name and Address of Current Registered Agent | | | | | 7. Name and Address of New Registered Agent | | | | | |
| Corporation Service Company | | | | | | | | | | |
| 1201 Hays Street Tallahassee, FL 32301 | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | | | | | | | | | 1 | |
| | | | | City | | | Zip Coo | le | 1 | |
| | | | | | <u> </u> | | | | | |
| 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. | | | | | | | | | | |
| | | | | | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered agent an | d title if applicable. (NOTI | E: Registered | Agent signature requi | red when reinstating) | DATE | | | | |
| 9. This corporation is eligible to satisfy its Intangible FILE NOWILL FEE IS \$150.00 | | | | | | | | 1 | | |
| Tax filing requirement and elects to do so. | | | | will be \$550.00 | Trust Fund | mpaign Financing Contribution. | | 0 May Be d to Fees | | |
| (See criteria on back) | | | | partment of S | tate | | | |] | |
| 11. | OFFICERS AND D | | 12. | | ADDITIONS/CHANG | ES TO OFFICERS AN | | | 6 | |
| TITLE | President & Director | ☐ Delete | TITLE | | | | Change | ☐ Addition | 5 | |
| NAME STREET ADORESS | Steven B. Dodge 116 Huntington Ave., | , | | T ADDRESS | | | | | 8 | |
| CITY-ST-ZIP | Boston MA 02116 | | CITY- | ST-ZIP | | | | | CR2E034 (11/00) | |
| TITLE | Vice President & Direc | ctor 🗆 Delete | TITLE | | | L& 13 | Change | ■ Addition | 8 | |
| NAME STREET ADDRESS | Justin D. Benincasa 116 Huntington Ave., | | NAME | T ADDRESS | , | ~@] · ; | | | | |
| CITY-ST-ZIP | Boston, MA 02116 | | | ST-ZIP | | 4 | | | Ì | |
| TITLE | Secretary and VP | Delete | TITLE | | | | Change | ☐ Addition | | |
| NAME | Jonathan R. Black | | NAME | | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | 116 Huntington Ave., Boston, MA 02116 | | | ET ADDRESS ST-2IP | | | | | | |
| TITLE | Treasurer, CFO & Direc | tor Delete | TITLE | | | | Change | ☐ Addition | | |
| NAME | Joseph L. Winn | COT THE DELEGE | NAME | | | | | | Ì | |
| STREET ADDRESS | 116 Huntington Avenue | | | T ADDRESS | | | | • | ļ | |
| CITY-ST-ZIP | Boston, MA 02116 | | CiTY- | ST-ZIP | | | | | } | |
| TITLE | COO & Director | ☐ Delete | TITLE NAME | | | | ☐ Change | Addition | | |
| NAME STREET ADDRESS | Douglas C. Wiest 116 Huntington Avenue | | | T ADDRESS | | | | | | |
| CITY-ST-ZIP | Boston, MA 02116 | | CITY- | ST-ZIP | | | | | | |
| TITLE | | ☐ Delete | TITLE | | | | ☐ Change | Addition | | |
| NAME EXPECT ADDRESS | · · | | NAME | T ADDRESS | رد دررا ول | "aa""aa""aaa | | | | |
| STREET ADDRESS CITY-ST-ZIP | | | | ST-ZIP | f 1!!_ | 000409 | 150 | 7 | P | |
| 42 (basabili | Legal of the companies | his filing does not qualify for | the ever | notion stated in | Section 119.07(3)(i), Florid | a Statutes. I further ce | rtify that the | information | | |
| 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and another and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the congregation of the report of the co | | | | | | | | | | |
| 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 11 or Block 12 if changed, or on an attachment with an address; with all other like empowered. | | | | | | | | | | |
| SIGNAT | TIDE: VATIVIS | (At/ | | | Apr: | il 24, 2001 | 617 375 | -7500 | | |
| SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Desture Phone 4 | | | | | | | | | | |



ACCOUNT NO. : 072100000032

REFERENCE :

4389224

AUTHORIZATION

COST LIMIT : \$ 150.00

ORDER DATE: April 27, 2001

ORDER TIME : 10:43 AM

ORDER NO. : 131664-045

CUSTOMER NO: 4389224

CUSTOMER: Ms: Kathleen A. Quinn

American Tower Corporation

116 Huntington Avenue

11th Floor

Boston, MA 02116

ANNUAL REPORT FILING

NAME:

OMNIAMERICA HOLDINGS

CORPORATION

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: