## 2007 FOR PROFIT CORPORATION. **ANNUAL REPORT**

**DOCUMENT # F99000002862** 

CROWN CASTLE USA, INC.



**FILED** Feb 14, 2007 08:00 AM **Secretary of State** 

Principal Place of Business

**510 BERING DRIVE** 

SUITE 600 HOUSTON, TX 77057 Mailing Address

**510 BERING DRIVE** SUITE 600

HOUSTON, TX 77057



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CR2E034 (11/05) 02072007 No Chg-P Applied For 4, FEI Number 25-1695742 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

BROWN, JAY

DEVP

HOUSTON, TX 77057

HOUSTON, TX 77057

2000 CORPORATE DRIVE

CANONSBURG, PA 15317

HAWK, E.BLAKE

YOUNG, JAMES

510 BERING DRIVE, SUITE 600

510 BERING DRIVE, SUITE 600

## DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the plinns of registered agent.	ourpose of changing its registered offi	ce or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable (NOTE: Registered Agent	elgnature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Financing     Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-SY-ZIP	DCEO KELLY, JOHN P 2000 CORPORATE DRIVE CANONSBURG, PA 15317				
TITLE NAME STREET ADORESS CITY-ST-ZIP	DEVP MORELAND, W. BENJAMIN 510 BERING DR., SUITE 600 HOUSTON, TX 77057				000000635302 02/23/07-80009-003 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S REID, DONALD J JR. 510 BERING DRIVE, SUITE 600 HOUSTON, TX 77057				NOT WRITE
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12. I hereby certify that the information supplied with this filling 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:

NAME

TITLE

NAME

TITLE NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP