

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000003780

1. Entity Name

CROWN CASTLE SOUTH INC

FILED

00 MAY 22 PM 1:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

375 Southpointe Blvd
Canonsburg, PA 15317

Mailing Address

510 BERING DR. #500
HOUSTON, TX 77057

2. Principal Place of Business

375 SOUTHPOINTE BLVD

3. Mailing Address

510 BERING DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

500

City & State

CANONSBURG PA

City & State

HOUSTON TX

4. FEI Number

74-2913900

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 South Pine Island Road
Plantation, FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT John Patrick Kelly 375 Southpointe Blvd Canonsburg, PA 15317	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President & Secretary Kathy Glass-Broussard 510 BERING DR #500 HOUSTON TX 77057	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Wesley D. Cunningham 510 BERING DRIVE SUITE 500 HOUSTON TX 77057	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP & DIRECTOR DAVID L. IVY 510 BERING DR #500 HOUSTON TX 77057	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP & CFO CHARLES C. GREEN III 510 BERING DR #500 HOUSTON TX 77057	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. Joseph L. Bressen 375 Southpointe Blvd Canonsburg, PA 15317	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	500003286505--2 -06/13/00--01027--008 ****558.00 ****558.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR TED B. MILLER JR 510 BERING DR #500 HOUSTON TX 77057	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

KATHY GLASS-BROUSSARD

Date

Daytime Phone #

CR2E034 (9/99)