## 2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

## DOCUMENT# M06000000504

Entity Name: GLOBAL SIGNAL ACQUISITIONS IV LLC

FILED Sep 25, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1220 AUGUSTA DRIVE SUITE 500 HOUSTON, TX 77057

Current Mailing Address: New Mailing Address:

1220 AUGUSTA DRIVE SUITE 500 HOUSTON, TX 77057

FEI Number: 20-4133355 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

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

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:

Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM

Name: GLOBAL SIGNAL OPERATING PARTNERSHIP, LP

Address: 1220 AUGUSTA DRIVE, SUITE 500

City-St-Zip: HOUSTON, TX 77057

Title: PCEO

Name: W. BENAJMIN, MORELAND
Address: 1220 AUGUSTA DRIVE, SUITE 500
City-St-Zip: HOUSTON, TX 77057 US

Title: DEVP

Name: E. BLAKE, HAWK

Address: 1220 AUGUSTA DRIVE, SUITE 500

City-St-Zip: HOUSTON, TX 77057 US

Title: DCFO

Name: JAY, BROWN A

Address: 1220 AUGUSTA DRIVE, SUITE 500

City-St-Zip: HOUSTON, TX 77057 US

Title:

 Name:
 DUVA, VICTOR

 Address:
 1209 ORANGE STREET

 City-St-Zip:
 WILMINGTON, DE 19801 US

Title: [

 Name:
 UVA, KENNETH

 Address:
 1209 ORANGE STREET

 City-St-Zip:
 WILMINGTON, DE 19801 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: GLOBAL SIGNAL OPERATING PARTNERSHIP L.P. MGRM 09/25/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date