

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # M99000000933



Entity Name
 UNISITE/OMNIPOINT FL TOWER VENTURE, LLC

Principal Place of Business
 116 HUNTINGTON AVE., 11TH FLOOR
 BOSTON, MA 02116

Mailing Address
 116 HUNTINGTON AVE., 11TH FLOOR
 BOSTON, MA 02116



01092006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3616984	Applied For Not Applicable
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5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

AGENT CORPORATION SYSTEM
 100 SOUTH PINE ISLAND ROAD
 DANFORTH, FL 33324

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I, 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
 Due by May 1, 2006**

MANAGING MEMBERS/MANAGERS

NAME	MGRM UNISITE, LLC
ADDRESS	116 HUNTINGTON AVE.
CITY-STATE-ZIP	BOSTON, MA 02116
NAME	
ADDRESS	
CITY-STATE-ZIP	
NAME	
ADDRESS	
CITY-STATE-ZIP	
NAME	
ADDRESS	
CITY-STATE-ZIP	

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 01/30/06-80088-013 50.00

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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 Statutes.

SIGNATURE: *Michael B. Milson* Michael B. Milson 1/9/2006 617 375-7520
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #