

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000103330 (2)
1. Corporation Name: SBA COMMUNICATIONS CORPORATION

FILED
23 APR 21 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

Mailing Address

6001 BROKEN SOUND PARKWAY
SUITE 400
BOCA RATON FL 33487

6001 BROKEN SOUND PARKWAY
SUITE 400
BOCA RATON FL 33487

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/23/1996

4. FEI Number

65-0716501

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21 One Town Center Road
Suite, Apt #, etc
22 3rd Floor

City & State

23 Boca Raton, Florida

Zip

24 33486

Country

25 USA

2a. Mailing Address

26 c/o General Counsel
One Town Center Road
Suite, Apt #, etc
27 3rd Floor

City & State

28 Boca Raton, Florida

Zip

29 33486

Country

30 USA

9. Name and Address of Current Registered Agent

VALDES-FAULI CORPORATE SERVICES, INC.
777 SOUTH FLAGLER DRIVE
EAST TOWER, SUITE 500
WEST PALM BEACH FL 33401

81 Name

Corporation Service Company

82

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

1201 Nays Street

83

500002498835--9

84

City

Tallahassee

-04/24/98-0160825-006

****150.00-****32.00

11. Pursuant to the provisions of Sections 607.0503 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Karen B. Rozar

Karen B. Rozar, As Its Agent

(If not Registered Agent, please print name and title)

4-21-98

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
CEOD
BERNSTEIN, STEVEN E
6001 BROKEN SOUND PKWY., STE 400
BOCA RATON FL 33487

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
EVC
BIZICK, RONALD G
6001 BROKEN SOUND PKWY., STE 400
BOCA RATON FL 33487

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
SVS
GROBSTEIN, ROBERT M
6001 BROKEN SOUND PKWY., STE 400
BOCA RATON FL 33487

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
SVP
STOOPS, JEFFREY A
6001 BROKEN SOUND PKWY., STE 400
BOCA RATON FL 33487

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
HEBB, DONALD
6001 BROKEN SOUND PKWY., STE 400
BOCA RATON FL 33487

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
LANDRY, KEVIN
6001 BROKEN SOUND PKWY., STE 400
BOCA RATON FL 33487

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP
CEOD
BERNSTEIN, STEVEN E.
ONE TOWN CENTER ROAD, 3RD FLOOR
BOCA RATON, FL 33486

☒ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP
EVC
BIZICK, RONALD G
ONE TOWN CENTER ROAD, 3RD FLOOR
BOCA RATON, FL 33486

☒ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP
SVS
GROBSTEIN, ROBERT M
ONE TOWN CENTER ROAD, 3RD FLOOR
BOCA RATON, FL 33486

☒ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP
SVP
STOOPS, JEFFREY A
ONE TOWN CENTER ROAD, 3RD FLOOR
BOCA RATON, FL 33486

☒ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP
D
HEBB, DONALD
ONE TOWN CENTER ROAD, 3RD FLOOR
BOCA RATON, FL 33486

☒ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP
D
LANDRY, KEVIN
ONE TOWN CENTER ROAD, 3RD FLOOR
BOCA RATON, FL 33486

☒ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Jeffrey A. Stamps

Jeffrey A. Stamps

3/24/98

CR2E034 (10/97)

2

ATTACHMENT I

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITION

7.1 Title	DIRECTOR
7.2 Name	RICHARD MILLER
7.3 Street Address	ONE TOWN CENTER ROAD, 3RD FLOOR
4.4 City-St-Zip	BOCA RATON, FL 33486