2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000004204 1. Entity Name NEW CENTURY TELECOM, INC.						FILED			
						00 JAN 14 AM 10: 04			
						080	RETARY!	of State , feorid	٠ ٨
Principal Place of Business Mailing Address						TALL	MASSEE	" LEBUIR	^
8190 GREENSBO MCLEAN VA 221	ORO DR., STE. 700 102	8190 GREENSBORO DR., STE, 700 MCLEAN VA 22102-3823							
						ANDREN IZIO GALDA AMBI NATU A	1)))	112 61618 12 6 41 86)(2	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & Stat	е	City & State			4. FE	Number 54-1765 5	 590		plied For
Zip Country		Zip Country		ntry	5. Ce	rtificate of Status Desire		\$8.75 Addi	
	6. Name and Address of Current	Registered Agent		T		me and Address of Ne		Fee Required Agent	1
				Name					
CORPORATION SERVICE COMPANY 1201 HAYS STREET				Street Address (P.O. Box Number is Not Acceptable)			able)		
	AHASSEE FL 32301-2525					***			
				City			FL	Zip Code	1
8. The above	named entity submits this statement fo	r the purpose of changing its	register	ed office or regis	stered agen	t, or both, in the State of	f Florida.		
SIGNATURE .		=							
	Signature, typed or printed name of registered agent	- 1		ed Agent signature requ	uired when reins	tating)	DATE	· . '	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! After MAY 1, 2000 Make Check Payable			00 Fee	will be \$550.0		 Election Campaign Trust Fund Contribution 			May Be to Fees
11,	OFFICERS AND		12.	<u> </u>		TIONS/CHANGES TO	OFFICERS AN	D DIRECTORS	S IN 11
TITLE NAME	P UELEIN CHADLES H	☐ Delete	TITL NAN	į.		400003	⊇11 4	Change	Addition
STREET ADDRESS	Helein, Charles H 8180 Greensboro Dr., Ste. 7	00	STR	EET ADORESS		-01/2	28/000) <u>1042</u> 0:	12
CITY-ST-ZIP TITLE	MCLEAN VA 22102 VP	Delete	TITL	r-ST-ZIP		****	£150.00	<u>***</u> *15! □ Change	
NAME	SCHNEBERGER, ROBERT F	boloto	NAN	AE .					
STREET ADDRESS CITY-ST-ZIP	8180 GREENSBORO DR., STE. 7 MCLEAN VA 22102	00		EET ADDRESS (-ST-ZIP					
TITLE	ST	☐ Delete	TITL NAM					☐ Change	☐ Addition
NAME STREET ADDRESS	Helein, Kathleen K 8180 Greensboro Dr., Ste. 7	00		EET ADDRESS					
CITY-ST-ZIP	MCLEAN VA 22102		_	r-ST-ZIP				☐ Change	 Addition
TITLE NAME	charles H. Helein 8180 Greensboro D	☐ Delete	TITL Nan					□ cuarige	☐ Accilion
STREET ADDRESS CITY-ST-ZIP	Mulean, VA 22			EET ADDRESS Y-ST-ZIP					
TITLE	Di Chache	vaer Delete	TITL	ε	 -			☐ Change	Addition
NAME STREET ADDRESS	8180 Greensbore	Dr., # 700	NAN STR	ME EET ADDRESS					
CITY-ST-ZIP	Mclean, VA 23	<u> </u>	-	Y-ST-ZIP					
TITLE NAME	Kathleen K. Helei	0 Dr., # 700	TITL NAM	ŀ				Change	☐ Addition
STREET ADDRESS City-St-Zip	8180 -4/4 - 00 10 0			EET ADORESS /-ST-ZIP				A	(E
13 Lhereby	certify that the information supplied with on this report or supplemental report is	this filing does not qualify for	r the exe	1 emption stated in	Section 11	9.07(3)(i), Florida Statut	es. I further ce	ertify that the in	formation
of the cor	on this report or supplemental report is report in the receiver or trustee emport or or an attachment with an address, when the content is the content of the content is the content of th	owered to execute this report	as requ	iture snail nave tr ired by Chapter (ne same leg 607, Florida	Statutes; and that my r	iame appears	in Block 11 or	Block 12 if
SIGNAT	\delta \del	1. Acknedia	لاليا	u.		1/7/00	703-	714-/3	22
SIGNAI		PRINTED NAME OF SIGNING OFFICER	OR DIFEC	TOR		Date		Daytime Phone #	