

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2002 8:00 am
Secretary of State

04-07-2002 90575 016 ***150.00

0579981 AT

DOCUMENT # F95000004204

1. Entity Name

NEW CENTURY TELECOM, INC.

Principal Place of Business

**8260 GREENSBORO DR., SUITE 240
 MCLEAN VA 22102**

Mailing Address

**8260 GREENSBORO DR., SUITE 240
 MCLEAN VA 22102**



2. Principal Place of Business

8180 Greensboro Dr.,

Suite, Apt. #, etc.

Suite 700

City & State

McLean, VA

Zip **22102**

Country

USA

3. Mailing Address

8180 Greensboro Dr.

Suite, Apt. #, etc.

Suite 700

City & State

McLean, VA

Zip **22102**

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

54-1765590

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional -
 Fee Required**

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE FL 32301-2525

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, 2002 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 **CEO** ☐ Delete
 NAME **HELEIN, CHARLES H**
 STREET ADDRESS **8260 GREENSBORO DR., SUITE 240**
 CITY-ST-ZIP **MCLEAN VA 22102**

TITLE **P** ☐ Delete
 NAME **SCHNEBERGER, ROBERT F**
 STREET ADDRESS **8260 GREENSBORO DR., SUITE 240**
 CITY-ST-ZIP **MCLEAN VA 22102**

TITLE **ST** ☐ Delete
 NAME **HELEIN, KATHLEEN K**
 STREET ADDRESS **8260 GREENSBORO DR., SUITE 240**
 CITY-ST-ZIP **MCLEAN VA 22102**

TITLE **D** ☐ Delete
 NAME **HELEIN, CHARLES H**
 STREET ADDRESS **8260 GREENSBORO DR., SUITE 240**
 CITY-ST-ZIP **MCLEAN VA 22102**

TITLE **D** ☐ Delete
 NAME **SCHNEBERGER, ROBERT F**
 STREET ADDRESS **8260 GREENSBORO DR., SUITE 240**
 CITY-ST-ZIP **MCLEAN VA 22102**

TITLE **D** ☐ Delete
 NAME **HELEIN, KATHLEEN K**
 STREET ADDRESS **8260 GREENSBORO DR., SUITE 240**
 CITY-ST-ZIP **MCLEAN VA 22102**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME **8180 Greensboro Dr., # 700**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME **8180 Greensboro Dr., # 700**
 STREET ADDRESS
 CITY-ST-ZIP

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 NAME **8180 Greensboro Dr., # 700**
 STREET ADDRESS
 CITY-ST-ZIP

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:

Robert F. Schnberger
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/02

Date

800-711-1322

Daytime Phone #

CR2E034 (9/01)