## INTERNATIONAL SECTION 214 APPLICATION FCC FORM 214 FOR OFFICIAL USE ONLY

## APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu: New Point Application

1. Applicant			
Name:	NewPoint Communications	Phone Number:	727–744–4281
DBA Name:		Fax Number:	727–255–5152
Street:	780 Maple Ridge Rd	E–Mail:	gstanley@newpointcommunication s.com
City:	Palm Harbor	State:	FL
Country:	USA	Zipcode:	34683 –
Attention:	Mr Cecil G Stanley		

2. Contact

Name: Gary Stanley Phone Number: 727–744–4281

Company: NewPoint Communications Fax Number: 727–255–5152

Street: 780 Maple Ridge Rd E–Mail: gstanley@newpointcommunication

s.com

City: Palm Harbor State: FL

Country: USA Zipcode: 34683 -

**Attention:** Mr. Cecil G. Stanley **Relationship:** Same

3. Place of Incorporation of Applicant Florida

4. Other Company(ies) and Place(s) of Incorporation

5. Service Type(s) (check all that apply)			
Global or Limited Global Facilities–Based Authority (Section 63.18(e)(1))			
Global or Limited Global Resale Authority (Section 63.18(e)(2))			
Individual Facilities—Based Service (Section 63.18(e)(3))			
Individual Switched Resale Service (Section 63.18(e)(3))			
Individual Facilities—Based and Resale Service (Section 63.18(e)(3))			
Switched Services over Private Lines (ISR) (Section 63.16 and/or 63.18 (e)(3))			
Inmarsat and Mobile Satellite Service (Section 63.18(e)(3))			
Overseas Cable Construction (Section 63.18(e)(3))			
Individual Non–Interconnected Private Line Resale Service (Section 63.18(e)(3))			
Other (Section 63.18(e)(3))			
6a. Is a fee submitted with this application?			
If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).			
Governmental Entity Noncommercial educational licensee			
Other(please explain):			
6b. Fee Classification CUT – Section 214 Authority			
7. Destination Country(ies) (e.g., "Country X", "All international points", "All international points except Country X and Country Y" or "Countries X, Y, and Z only".) All international points			

13. Does the applicant seek authority to provide service to any destinations other than those listed in response to question 12 where it has an affiliation with a foreign carrier? If yes, list those destinations in Attachment 1 as a response to question 13.	<b>●</b> N	lo
14. [Section 63.18(h)] In Attachment 2, provide the name, address, citizenship and principal business of the applicant's ten percent or greater direct and indirect shareholders or other equity holders, and identify any interlocking directorates.		
15. In Attachment 2, respond to paragraphs (d), (e)(3) and (g) of Section 63.18.		
16. By checking Yes, the undersigned certifies that neither applicant nor any other party to the application is subject of a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti–Drug Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance. See 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes.	<b>●</b> N	Го
17. By checking Yes, the applicant certifies that it has not agreed to accept special concessions directly or indirectly from a foreign carrier with respect to any U.S. international route where the foreign carrier possesses sufficient market power on the foreign end of the route to affect competition adversely in the U.S. market and will not enter into such agreements in the future.	<b>●</b> N	lo

## **CERTIFICATION**

18. Typed Name of Person Signing (Must be a Corporate Officer)	19. Title of Person Signing				
Cecil G. Stanley	President				
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT (U.S. Code, Title 18, Section 1001), AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, Section 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).					
20. 1:	3:				

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