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ORIGINAL
FILE COPY

YOUNG, VAN ASSENDERP & VARNADOE, P. A.
ATTORNEYS AT LAW

REPLY TO

Tallahassee

R. BRUCE ANDERSON
TASHA O. BUFORD
DAVID L. COOK*
DAVID B. ERWIN
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ROY C. YOUNG

*BOARD CERTIFIED REAL ESTATE LAWYER

WILLIAM J. ROBERTS
OF COUNSEL

January 29, 1997

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990129 TV

HAND DELIVER

Ms. Blanca S. Bayo, Director
Division of Records and Reporting
Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, FL 32399-0850

Dear Ms. Bayo:

Enclosed is the application of Indiantown Telephone System, Inc. for a Certificate of Authority to provide "Alternative Local Exchange Service Within the State of Florida." This application is being filed pursuant to the provisions of Section 364.337, Florida Statutes, and Part XV, Chapter 25-24, F.A.C. This application is for statewide authority to provide all Commission approved telecommunications services.

Also enclosed is the applicant's check in the amount of \$250.00 to cover the filing fee, as required by Rule 25-24.810(1), F.A.C., and the application is being submitted with six copies, as required by Rule 25-24.810(2), F.A.C.

The application does not at this time contain a price list. The applicant will provide a price list prior to providing service. The location of and the exact nature of the services to be provided have not been finalized at this time.

Check received with filing and forwarded to Florida for deposit. Filed in account number of check with Florida for deposit.

01/30/97
1/30/97

01142 0128

Ms. Blanca S. Bayo, Director
Page 3
January 29, 1997

Thank you for your attention to this filing. If there are any questions, please call me or Robert M. Post, Jr., the applicant's president.

Sincerely,

A handwritten signature in dark ink, appearing to read "David B. Erwin". The signature is fluid and cursive, with a prominent initial "D" and a long, sweeping underline.

David B. Erwin

DBE:akh
Enclosures
cc: Robert M. Post, Jr.

97029-78

1. This is an application for (check one):

(X) **Original authority (new company)** (existing IEC)

() **Approval of transfer (to another certificated company)**
Example, a certificated company purchases an existing company and desires to retain the original certificate authority.

() **Approval of assignment of existing certificate (to a noncertificated company)**
Example, a non-certificated company purchases an existing company and desires to retain the certificate of authority rather than apply for a new certificate.

() **Approval for transfer of control (to another certificated company)**
Example, a company purchases 51% of a certificated company. The Commission must approve the new controlling entity.

2. Name of applicant:

Indiantown Telephone System, Inc.

3. Name under which the applicant will do business (d/b/a):

Corporate name

4. If applicable, please provide proof of fictitious name (d/b/a) registration.

Fictitious name registration number: N/A

5. A. National mailing address including street name, number, post office box, city, state, zip code, and phone number.

N/A

B. Florida mailing address including street name, number, post office box, city, state, zip code, and phone number.

15925 SW Warfield Boulevard, P. O. Box 277, Indiantown, FL 34956
(561) 597-2111

DOCUMENT RECEIVED
11/14/2005

6. Structure of organization:

- | | |
|--|--|
| <input type="checkbox"/> Individual | <input checked="" type="checkbox"/> Corporation |
| <input type="checkbox"/> Foreign Corporation | <input type="checkbox"/> Foreign Partnership |
| <input type="checkbox"/> General Partnership | <input type="checkbox"/> Limited Partnership |
| <input type="checkbox"/> Joint Venture | <input type="checkbox"/> Other. Please explain _____ |

7. If applicant is an individual, partnership, or joint venture, please give name, title and address of each legal entity.

N/A

8. State whether any of the officers, directors, or any of the ten largest stockholders have previously been adjudged bankrupt, mentally incompetent, or found guilty of any felony or of any crime, or whether such actions may result from pending proceedings. If so, please explain.

The applicant has no such officers, directors or shareholders.

9. If incorporated, please provide proof from the Florida Secretary of State that the applicant has authority to operate in Florida.

Corporate charter number: 367658

10. Please provide the name, title, address, telephone number, internet address, and facsimile number for the person serving as ongoing liaison with the Commission, and if different, the liaison responsible for this application.

James P. McGinn Telephone # 561/597-3636
Revenue Requirements/Regulatory Manager Fax # 561/597-2115

P. O. Box 277
Jacksonville, FL 32202

11. Please list other states in which the applicant is currently providing or has applied to provide local exchange or alternative local exchange service.

None

12. Has the applicant been denied certification in any other state? If so, please list the state and reason for denial.

No

13. Have penalties been imposed against the applicant in any other state? If so, please list the state and reason for penalty.

No

14. Please indicate how a customer can file a service complaint with your company.

Customers will be outside of the certified LEC territory of the applicant, so they will be given information when service is initiated. They will be able to file a complaint by phone, fax or mail to the company or to the FPSC at the 800 number or address provided.

15. Please complete and file a price list in accordance with Commission Rule 25-24.825.

16. Please provide all available documentation demonstrating that the applicant has the following capabilities to provide alternative local exchange service in Florida.

A. **Financial capability.** The applicant is a LEC of long standing. Annual financial reports are on file at the FPSC, and as a result of recently choosing price regulation, the applicant expects to be audited soon.

Regarding the showing of financial capability, the following applies:

The application should contain the applicant's financial statements for the most recent 3 years, including:

1. the balance sheet
2. income statement
3. statement of retained earnings.

Further, a written explanation, which can include supporting documentation, regarding the following should be provided to show financial capability.

1. Please provide documentation that the applicant has sufficient financial capability to provide the requested service in the geographic area proposed to be served.
2. Please provide documentation that the applicant has sufficient financial capability to maintain the requested service.
3. Please provide documentation that the applicant has sufficient financial capability to meet its lease or ownership obligations.

NOTE: This documentation may include, but is not limited to, financial statements, a projected profit and loss statement, credit references, credit bureau reports, and descriptions of business relationships with financial institutions.

If available, the financial statements should be audited financial statements.

If the applicant does not have audited financial statements, it shall be so stated. The unaudited financial statements should then be signed by the applicant's chief executive officer and chief financial officer. The signatures should attest that the financial statements are true and correct.

B. Managerial capability. The applicant has successfully operated as a LEC for many years under the regulatory supervision of the FPSC.

C. Technical capability.

(If you will be providing local intra-exchange switched telecommunications service, then state how you will provide access to 911 emergency service. If the nature of the emergency 911 service access and funding mechanism is not equivalent to that provided by the local exchange companies in the areas to be served, described in detail the difference.)

See paragraph B. above.

AFFIDAVIT

By my signature below, I, the undersigned officer, attest to the accuracy of the information contained in this application and attached documents and that the applicant has the technical expertise, managerial ability, and financial capability to provide alternative local exchange service in the State of Florida. I have read the foregoing and declare that to the best of my knowledge and belief, the information is true and correct. I attest that I have the authority to sign on behalf of my company and agree to comply, now and in the future, with all applicable Commission rules and orders.

Further, I am aware that pursuant to Chapter 837.06, Florida Statutes, "Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082 and s. 775.083".

Official: 
Signature
ROBERT M. POST, JR.

1-21-97
Date

Title: President and Director

561/597-3113
Telephone Number

Address: 15925 SW Warfield Boulevard
P. O. Box 277
Indiantown, FL 34956

YOUNG, VAN ASSENDERP & VARNADOE, P. A.

ATTORNEYS AT LAW

REPLY TO DEPOSIT THROUGH MAIL DATE

11451 #000
Tallahassee

11451 #000
JUN 7 1997
229
COUNTY HALL
229 SOUTH ADAMS STREET, SUITE 200
POST OFFICE BOX 633
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WILLIAM J. ROBERTS
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January 29, 1997

970129

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YOUNG, VAN ASSENDERP & VARNADOE, P. A.

ATTORNEYS AT LAW

REPLY TO 11451 11th St. Tallahassee, FL 32302-1833

11451 11th St.
Tallahassee

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January 29, 1997

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Florida Certified Real Estate License

WILLIAM J. HUBBERTS
OF COUNSEL

970129-TX

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Dear Ms. Bayo:

Enclosed is the application of Indiantown Telephone System, Inc. for a Certificate of Authority to provide "Alternative Local Exchange Service Within the State of Florida." This application is being filed pursuant to the provisions of Section 364.337, Florida Statutes, and Part 17, Florida Administrative Code.

ARROW COMMUNICATIONS, INC.

GENERAL FUNDS ACCOUNT

P.O. BOX 1727
INDIANTOWN, FL 34956



FIRST BANK
OF INDIANTOWN
Established 1888

CHECK DATE	CHECK NO.
1/23/97	1374

Exactly \$****250 and 00/100 Dollars

CHECK AMOUNT
\$****250.00

PAY

TO
THE
ORDER
OF

FLORIDA PUBLIC SERVICE
COMMISSION
2540 SHUMARD OAK BLVD.
TALLAHASSEE, FL 32399-0850

ARROW COMMUNICATIONS, INC.

Print Area
Sharon J. Smith