

STATE OF FLORIDA

Commissioners:
E. LEON JACOBS, JR., CHAIRMAN
J. TERRY DEASON
LILA A. JABER
BRAULIO L. BAEZ
MICHAEL A. PALECKI



DIVISION OF COMPETITIVE SERVICES
WALTER D'HAESELEER
DIRECTOR
(850) 413-6600

Public Service Commission

June 13, 2001

Mr. Donald K. Stimson, President
FKI Enterprises, Inc.
PO Box 194
Stuart, FL 34995-0194

Re: Docket No. 010487-TC

Dear Mr. Stimson:

On April 30, 2001, the Commission received your letter, which stated that you had written a note on the Regulatory Assessment Fee (RAF) return that you were ceasing operation effective the due date of the RAF report. Unfortunately, the Commission did not receive your 2000 RAF return and our records show that the 2000 RAF has not been paid as of this date. In addition, our records show that you have a \$6.00 penalty and interest balance for the 1999 RAF. A breakdown is enclosed. Depending upon when your check is postmarked, penalty and interest charges will continue to accrue. The 2000 and 2001 RAF return forms are attached.

Rule 25-4.514, Florida Administrative Code, provides that a pay telephone company must write the Commission and request cancellation and include an explanation of why it wants its certificate cancelled and provide the date it will pay the current year's RAF.

There are two kinds of cancellations. The first is voluntary, which is normally granted if the company is in good standing with the Commission and does not have a past due balance of the RAF, including statutory penalty and interest charges. The other is involuntary. If a company is not in good standing and has an outstanding balance of the RAF, the Commission normally cancels the certificate on its own motion for a rule violation. It should be noted that any balance owed is forwarded to the Comptroller's Office for further collection efforts.

The RAF is assessed if a certificate is active for any one day during a calendar year. The RAF is due by January 30 of each year, unless the 30th falls on a weekend, then the fee is due by the next working day, for the previous year. If payment for the RAF is mailed after the due date, then statutory penalty and interest charges are applicable.

The effective date of a voluntary cancellation is the date that the Commission received a company's request for cancellation. In this case, the Commission did not receive your request until

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PSC Website: <http://www.floridapsc.com>

Internet E-mail: contact@psc.state.fl.us

DOCUMENT NUMBER-DATE

07388 JUN 13 2001

FPSC-RECORDS/REPORTING

Mr. Donald K. Stimson, President
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June 13, 2001

April 30, 2001, therefore, the company will owe the 2001 RAF, even if the company is no longer in business or, in fact, never went into business.

Therefore, based on the above information, I cannot recommend a voluntary cancellation of your certificate unless the past due balance is paid. Please respond in writing by June 28, 2001, and let me know how you wish to proceed. In the meantime, if you have any questions, just let me know. I can be reached at (850) 413-6502-voice, (850) 413-6503-fax, by internet e-mail at pisler@psc.state.fl.us, or at the above address.

Sincerely,



Paula J. Isler, Research Assistant
Bureau of Service Quality

Enclosures

cc: Docket No. 010487-TC
Division of Legal Services (K. Peña)

FKI Enterprises (TF607)
Certificate No. 4542, Effective 03/19/96

Year	Fee	Penalty	Interest	Notes
1999	N/A	\$ 5.00	\$1.00	Payment was due 01/31/01. Company postmarked the \$50 minimum on 03/15/00, but did not pay the penalty and interest, leaving a balance of \$6.00.
2000	\$50.00	\$12.50	\$2.50	Payment was due 01/30/01, and remains unpaid as of 06/12/01. The amount shown to the left is the amount due IF payment is postmarked by 06/29/01. If payment is postmarked between 06/30/01 and 07/29/01, the interest increases to \$3.00, for a 2000 total of \$65.50.
2001	\$50.00	n/a	n/a	Payment is due 01/30/02. Company must either pay the 2001 fee or provide a date certain it will be paid.
Total	\$100.00	\$17.50	\$3.50	Total if payment is postmarked by 06/29/01: \$121.00. Total if payment is postmarked between 06/30/01 and 07/29/01: \$121.50.

Pay Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- _____ Actual Return
- _____ Estimated Return
- _____ Amended Return

TF607
 FKI Enterprises, Inc.
 P. O. Box 194
 Stuart, FL 34995-0194

Docket # 010487-TC

PERIOD COVERED:
 01/01/2000 TO 12/31/2000

FOR PSC USE ONLY

Check# _____

\$ _____ 0603002
 _____ 003001

\$ _____ P
 _____ 0603002
 _____ 004011

\$ _____ I

Postmark Date _____

Initials of Preparer _____

Please Complete Below If Official Mailing Address Has Changed

_____ (Name of Company) _____ (Address) _____ (City/State) _____ (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ _____
2.	Gross Intrastate Revenue	_____
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	(_____)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ _____
5.	Regulatory Assessment Fee Due — (Multiply Line 4 by 0.0015)	_____
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____
8.	TOTAL AMOUNT DUE	\$ _____

AS PROVIDED IN SECTION 364.336 FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50

THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUES REPORTED

9. Number of pay telephones in operation at close of period covered by this Return _____

* These amounts must be intrastate only and must be verifiable.

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to the best of my knowledge and belief the above information is a true and correct statement. I am aware that pursuant to Section 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.

_____ (Signature of Company Official) _____ (Title) _____ (Date)

_____ (Preparer of Form - Please Print Name) Telephone Number (_____) Fax Number (_____)

F.E.I. No. _____

Pay Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

FOR PSC USE ONLY	
Check# _____	
\$ _____	0603002
	003001
\$ _____	P
	0603002
	004011
\$ _____	I
Postmark Date _____	
Initials of Preparer _____	

STATUS:

- _____ Actual Return
- _____ Estimated Return
- _____ Amended Return

TF607
 FKI Enterprises, Inc.
 P. O. Box 194
 Stuart, FL 34995-0194

Docket # 010487-TC

PERIOD COVERED:
 01/01/2001 TO 12/31/2001

Please Complete Below If Official Mailing Address Has Changed

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(Signature of Company Official)	(Title)	(Date)
(Preparer of Form - Please Print Name)	Telephone Number (_____)	Fax Number (_____)
	F.E.I. No. _____	