## to avoid penalty and interest charges, the regulatory assessment fee return must be filed on or before 01/30/2003Pay Telephone Service Provider Regulatory Assessment Fee Return Florida Public Service Commission STATUS: (See Filing Instructions on Back of Form) ORIGINA Actual Return TG804-02-0-R **Estimated Return** Holiday Gardens, LLC Amended Return 1101 East Sample Road

	D COVERED: 2002 TO 12/31/2002	D286 JAN 072003			Postmark Date 1/2/03 Initials of Preparer 2/1/C	
		Please Complete Below If Of	ficial Mailing Address Has Chan	ged	And a transmission of the thirty of the second of the seco	
	(Name of Company)	(Add	dress)	(City/	State) " ১ নেট প্রকরে শ্রেণ্ডার (Zip) দেখনে	
LINE <u>NO.</u>	ACCOUNT CLASSIFICATION			• .	The Mount of American Company of the	
1.	Gross Operating Revenue (Florida)				#\$ 1000 AT 1	
2.	Gross Intrastate Revenue					
3.	LESS: Amounts Paid to Other Telecommunications Companies*  (see "2 Fees" on back)  COMMUNICATION COMPANIES*			CMP COM CTR ECR	- 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)  GCL OPC MMS				<b>S S S S S S S S S S</b>	
5.	Regulatory Assessment Fee Due – (Multiply Line 4 by 0.0015)  SEC OTH				Acceptance of the second secon	
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)			k) ·	en is expectable. The control of	
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)			k)	Twiting at Report Co	
8.	TOTAL AMOUNT DUE				S	
		D IN SECTION 364.336 FLORU COMPLETED AND RETURNEI	·	1	REVENUES REPORT \ CO	CLERK
9.	Number of pay telephones in operation at close of period covered by this Return				— O WW 6	1.SS   0.X
* These a	mounts must be intrastate only and m	ust be verifiable.	7110		4ENT	PSC-COM
true and c	correct statement. I am aware that p	above-named company, have read the for pursuant to Section 837.06, Florida Statt cial duty shall be guilty of a misdemean	utes, whoever knowingly makes a fa	of my knowledg alse statement in	ge and belief the above inform of writing with the intent to mi:	
<i>ب</i> ——	Burliana (Signature of Confin	unding	<u> pookkee</u>	per lie)	12 <b>3</b> 1/02	1 (4.01) (4.01)
_B	ARBARA (FA) (Preparer of Form - Pleas	b/CS se Print Name)	Telephone Number 954	783-71	00 Fax Number (974-7-7-83-65)	3