IO AVOID PENALTY AN	nd interese charges Pay Tele	the regulatory assessment fel rephone Service Provide	rurn musi br fil r Regulato	ed on or before 01 ory Assessme	30/2003 ent Red	RIGINAL	
STATUS:	P. 13/e/	Florida Public Ser		ission	C	FOR PSC USE ONLY	
	ed Return  RED:		>0\$IT 30 <b>■</b>	DATE JAN 1786 30000-PC	)   s	0603002 003001 P 0603002 004011 P ostmark Date ///4/03	
F.P. WADE	E TNC.	Please Complete Below If Off //30 LAKE (Add	SHORE		E/03 L/ (City/Star	AKE PARK, FL 3340	
LINE NO.		ACCOUNT CLASSIFICA	TION			AMOUNT	
1. Gross	Gross Operating Revenue (Florida)						
2. Gross	Gross Intrastate Revenue						
	LESS: Amounts Paid to Other Telecommunications Companies*  (see "2. Fees" on back)						
	AL REVENUE 2 less Line 3)	ES for Regulatory Assessi	ment Fee Ca	alculation		\$ <b>ø</b>	
5. Regul	atory Assessme	ent Fee Due – (Multiply Li	ne 4 by 0.00	115)			
6. Penalt	ty for Late Payr	ment (see "3. Failure to File	e by Due Da	te" on back)			
7. Interes	st for Late Payr	nent (see "3. Failure to File	e by Due Da	te" on back)		<del></del>	
8. <b>TOT</b> A	AL AMOUNT	DUE				\$ 50.00 AUS	
	ORM MUST BE C	O IN SECTION 364.336 FLORID  OMPLETED AND RETURNED  nones in operation at close	REGARDLES	S OF THE AMOU		VENUES REPORTED GCL GCL GPC MMs	
by this	s Return	-	•			SEC TH No.	
true and correct statem	ient I am aware that pi	pove-named company, have read the fore ursuant to Section 837.06, Florida Statut ial duty shall be guilty of a misdemeanor	es, whoever know	mely makes a false st	knowledge ar atement in wri	nd belief the above information is a ting with the intent to mislead a	
Fred	Cric P. 2 (Signature of Compar	vado	PRES	/BENT (Title)			
<u>FηEλE</u> (Preparer	PIC P W/ of Form - Please			nber <u>(561) 882 -</u>		(Date)  ax Number (56) 882-0311  7 4	
						5 JAN 16 8	

## **Master Commission Directory Information**

## Frederic P. Wade, Inc. d/b/a Precision Payphones (TC822) Certificate No. 918, Effective 05/30/86

	Current Information	Make Changes Here	
1 <sup>st</sup> Liaison's Name	Frederic P. Wade		
1st Liaison's Title	Owner		
1st Liaison's E-mail Address			
2 <sup>nd</sup> Liaison's Name			
2 <sup>nd</sup> Liaison's Title			
2 <sup>nd</sup> Liaison's E-mail Address			
Mailing Address	59 Arapaho Drive Pensacola, FL 32507-8736	1130 LAKE SHORE LAKE PARK, FL 33403	DRIVE #
Physical Address	59 Arapaho Drive Pensacola, FL 32507-8736		
Phone Number	( <del>850) 492-8106</del>	561-882-0211	
Fax Number			
Website			

REQUESTING TO CANCEL MY CERTIFICATE # 918

## 25-24.514 Cancellation of a Certificate.

- (1) The Commission may cancel a company's certificate for any of the following reasons:
- (a) Violation of the terms and conditions under which the authority was originally granted;
- (b) Violation of Commission rules or orders;
- (c) Violation of Florida Statutes; or,
- (d) Failure to provide service for a period of six (6) months.
- (2) If a certificated company desires to cancel its certificate, it shall request cancellation from the Commission in writing and shall provide the following with its request.
- (a) Statement of intent and date to pay Regulatory Assessment Fee.
- (b) Statement of why the certificate is proposed to be cancelled.
- (3) Cancellation of a certificate shall be ordered subject to the holder providing the information required by subsection (2).

Specific Authority 350.127(2) FS. Law Implemented 350.113, 350.127(1), 364.03, 364.285, 364.337, 364.345 FS. History-New 1-5-87.

I, FREDERIC P. WADE, PRESIDENT OF F.P. WADE, INC.,

DO HEREBY REQUEST FROM THE COMMISSION A CANCELLATION

OF MY PAY TELEPHONE CERTIFICATE DUE TO THE FACT I

HAVE SOLD ALL MY PAY TELEPHONES OVER TWO (2) YEARS

AGO AND HAVE NOT BEEN OPERATING THE BUSINESS BUBSEQUE.

TO THAT SALE. I WOULD LIKE TO HAVE THE COMMISSION WAIVE

THE REGULATORY ASSESSMENT FEE RELEVANT TO THIS

REQUEST. THANK YOU IN ADVANCE FOR YOUR CONSIDERATION

F.P. WADE, INC.