

ORIGINAL

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/31/2003

Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS:

- Actual Return
- Estimated Return
- Amended Return

*P. Isler
CCA*

Florida Public Service Commission

(See Filing Instructions on Back of Form)

PERIOD COVERED:
01/01/2002 TO 12/31/2002

TG737-02-0-R
 James W. & Jolene R. Smith
 25800 Lake Amelia Way, #202
 Bonita Springs, FL 34135-3803 *030000-RU*

DEPOSIT DATE
03 02 FEB 04 2003

FOR PSC USE ONLY
 Check# 01092
 \$ 2.02 0603002
 003001
 \$ _____ P
 0603002
 004011
 \$ _____ I
 Postmark Date 1-29-03
 Initials of Preparer vm

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)	\$ <u>1346.-</u>
2.	Gross Intrastate Revenue	_____
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	(<u>None</u>)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ <u>1346.-</u>
5.	Regulatory Assessment Fee Due -- (Multiply Line 4 by 0.0015)	<u>2.02</u>
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	\$ <u>2.02</u>

- AUS _____
- CAF _____
- CMP _____
- COM _____
- CTR _____
- ECR _____
- GCL _____
- OPC _____
- MMS _____
- SEC L
- OTH _____

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 0
Last Return - I no longer have any payphones in service. - JWS.

* 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.

James W Smith
(Signature of Company Official)

Owner
(Title)

1-28-03
(Date)

James W Smith
(Preparer of Form - Please Print Name)

Telephone Number (941) 948-2133 Fax Number ()

F.E.I. No. DOCUMENT SUBMITTED

01134 FEB-4 8

FPSC-COMMUNICATIONS CLERK