

# Alternative Local Exchange Company Regulatory Assessment Fee Return

## ORIGINAL

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return  
 Estimated Return  
 Amended Return

*N. Grant  
P. Isler  
VCCA*

PERIOD COVERED:

08/08/2002 TO 12/31/2002

TX672-02-0-R  
 DukeNet Communications, LLC  
 400 South Tryon Street, MC WC 29  
 Charlotte, NC 28202-1904  
 CC: P. Isler DS 41 APR 17 2003

FOR PSC USE ONLY	
Check#	9177
\$	53.00
\$	7.50
\$	1.50
Postmark Date	4/15/03
Initials of Preparer	MC

Please Complete Below If Official Mailing Address Has Changed

DukeNet Communications, LLC 400 S. Tryon St, Charlotte, NC 28202  
 (Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA	
		GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Basic Local Services	\$ 0	\$ 0
2.	Long Distance Services (IntraLATA only)**	0	0
3.	Access Services	0	0
4.	Private Line Services	0	0
5.	Leased Facilities & Circuits Services	0	0
6.	Miscellaneous Services	0	0
7.	TOTAL REVENUES		\$ 0
8.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)		0
9.	Net Intrastate Operating Revenue for Regulatory Assessment Fee Calculation (Line 7 less Line 8)		0
10.	Regulatory Assessment Fee Due (Multiply Line 9 by 0.0015)		\$50.00
11.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	\$10.00	
12.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	\$2.00	
13.	TOTAL AMOUNT DUE		\$62.00

- AUS
- CAF
- CMP
- COM
- CTR
- ECR
- GCL
- OPC
- MMS
- SEC 1
- OTH Non
- NONNYE

\* These amounts must be intrastate only and must be verifiable.  
 \*\* Other long distance revenue must be listed on the Interexchange Regulatory Assessment Fee Return.

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

CURRENT COMPANY STATUS

- Facilities-Based Provider  
 Reseller  
 Other: \_\_\_\_\_

BILLING INFORMATION

Complete below if billing agent if other than yourself.

\_\_\_\_\_  
 (Name) (Address: City/State/Zip) (Telephone)

COMPANY INFORMATION

Do you lease telecommunications' facilities? ( ) YES (X) NO  
 If YES, who do you lease these facilities from? Name: \_\_\_\_\_  
 Address: \_\_\_\_\_

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/her duty shall be guilty of a misdemeanor of the second degree.

*Terri McElroy*  
 (Signature of Company Official) Controller 4/15/03  
 (Title) (Date)  
 Telephone Number (704) 382-7162 DOCUMENT NUMBER DATE  
 Fax Number (704) 382-9369  
 F.E.I. No. 56-187930 3527 APR 17 03