

Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS: *P. Isler*
 _____ Actual Return
 _____ Estimated Return
 _____ Amended Return

PERIOD COVERED:
 12/09/2002 TO 12/31/2002

Florida Public Service Commission
 (See Filing Instructions on Back of Form)

ORIGINAL DEPOSIT DATE

TG928-02-0-R
 Ocean Palms Beach Club, Inc. *D.353* JUN 02 2003
 2601 South Atlantic Avenue
 New Smyrna Beach, FL 32169-3421
 CC: *P. Isler* *0 30000 RY*

FOR PSC USE ONLY
 Check# 2345
 \$ 50.00 0603002
 \$.02 003001
 P 0603002
 004011
 Postmark Date 5/27/03
 Initials of Preparer MC

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>19.25</u>
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)	\$ <u>19.25</u>
5.	Regulatory Assessment Fee Due – (Multiply Line 4 by 0.0015)	<u>.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>50.02</u>

- AUS _____
- CAF _____
- CMP _____
- COM _____
- CTR _____
- GCL _____
- OPC _____
- MMS _____
- SEC I
- 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 1

* 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 P. Toek
 (Signature of Company Official)
James P. Toek
 (Preparer of Form - Please Print Name)

General Manager 5-27-03
 (Title) (Date)
 Telephone Number 386 423-1373 Fax Number 386 423-5031
 F.E.I. No. 59-2280080

DOCUMENT FILED DATE
 04846 MAY 30 03
 FPSC-COMMISSION CLERK