

ORIGINAL

030511-TI

CX 2145
\$ 250.00
MC

1. This is an application for (check one):

- Original certificate** (new company).
- Approval of transfer of existing certificate:** Example, a non-certificated company purchases an existing company and desires to retain the original certificate of authority.
- Approval of assignment of existing certificate:** Example, a certificated company purchases an existing company and desires to retain the certificate of authority of that company.
- Approval of transfer of control:** Example, a company purchases 51% of a certificated company. The Commission must approve the new controlling entity.

DEPOSIT DATE

11
D 356 JUN 10 2003

2. Name of company:

Tallahassee Telephone Exchange, Inc.

3. Name under which applicant will do business (fictitious name, etc.):

TTE

4. Official mailing address (including street name & number, post office box, city, state, zip code):

P.O. Box 11042
Tallahassee, FL 32302

5. Florida address (including street name & number, post office box, city, state, zip code):

1367 Mahan Drive
Tallahassee, FL 32308

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

FORM PSC/CMU 31 (12/96)
Required by Commission Rule Nos. 25-24-470,
25-24-471, and 25-24-473, 25-24-480(2).

Check received with filing and forwarded to Fiscal for deposit. Fiscal to forward deposit information to Records.

Initials of person who forwarded check:

ABM

DOCUMENT NUMBER-DATE

05151 JUN 11 8

FPSC-COMMISSION CLERK