

DEPOSIT DATE

06-03-002

CK# 1002  
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472 JUN 16 2004

ORIGINAL

040539-TC

1. Name of company or name of individual (not fictitious name or d/b/a): Linda M. Jay

2. Name under which applicant will do business (fictitious name, etc.): Linda Communications

3. Official mailing address:  
Street: 395 Mary Esther Cutoff  
P.O. Box: \_\_\_\_\_  
City: Ft. Walton Bch.  
State: Florida Zip: 32548

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4. Florida address:  
Street: \_\_\_\_\_  
P.O. Box: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_

5. Structure of organization:  
 Individual  
 Corporation  
 General Partnership  
 Limited Partnership  
 Other: \_\_\_\_\_

6. If incorporated in Florida, provide proof of authority to operate in Florida:  
Florida Secretary of State  
Corporate Registration Number: \_\_\_\_\_

- CMP \_\_\_\_\_
- COM \_\_\_\_\_
- CTR \_\_\_\_\_
- ECR \_\_\_\_\_
- GCL \_\_\_\_\_
- OPC \_\_\_\_\_
- MMS \_\_\_\_\_
- RCA \_\_\_\_\_
- SCR \_\_\_\_\_
- SEC   1
- OTH \_\_\_\_\_

Form PSC/CMU-32 (02/99)  
Required by Commission Rule Nos. 25-24.510 & 25-24.511  
File Name: cmu-32.doc

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