

REQUEST TO ESTABLISH DOCKET

(Please Type)

Date:	8/20/2004	Docket No.:	040912-TT
1. Division Name/Staff Name:	Division Of Competitive Markets & Enforcement/Isler		
2. OPR:	Division Of Competitive Markets & Enforcement		
3. OCR:	Office Of The General Counsel		
4. Suggested Docket Title:	Compliance investigation of Maxcess, Inc. for apparent violation of Section 364.336, Florida Statutes.		
5. Suggested Docket Mailing List (attach separate sheet if necessary)			
A. Provide NAMES OR ACRONYMS ONLY if a regulated company.			
B. Provide COMPLETE NAME AND ADDRESS for all others. (Match representatives to companies.)			
1. Parties and their representatives (if any):			
2. Interested persons and their representatives (if any):			
6. Check one:			
<input checked="" type="checkbox"/> Documentation is attached.			
<input type="checkbox"/> Documentation will be provided with recommendation.			

DOCUMENT NUMBER-DATE

09116 AUG 20 08

STATE OF FLORIDA

COMMISSIONERS:
BRAULIO L. BAEZ, CHAIRMAN
J. TERRY DEASON
LILA A. JABER
RUDOLPH "RUDY" BRADLEY
CHARLES M. DAVIDSON



DIVISION OF COMPETITIVE MARKETS &
ENFORCEMENT
BETH W. SALAK
DIRECTOR
(850) 413-6600

Public Service Commission

June 10, 2004

Mr. Jim Marchant, President
Maxcess, Inc. (TJ313)
PO Box 951419
Lake Mary, FL 32795-1419

Dear Mr. Marchant:

The Regulatory Assessment Fee (RAF) is due by January 30th of each year for the preceding calendar year. For certificate holders, the RAF is owed even if a telecommunications company may not have started operations or had any revenues. Since payment has not been made, statutory penalty and interest charges are now applicable.

Our records show that the 2003 RAF return notice was mailed on December 12, 2003, and a delinquent notice was mailed on February 20, 2004. As of this date, our records do not show receipt of the RAF return or payment. A copy of the 2003 RAF return form is enclosed. Our records also show that you have a small past due balance for a prior year's fee or statutory penalty and interest charges, which must be paid. A breakdown is enclosed. If full payment, including penalty and interest charges, along with the RAF return form, are not received by July 2, 2004, a docket may be established. Your company may be fined or your certificate cancelled if you do not respond. Please note that once a docket has been established, **just paying the delinquent RAF amount will not prevent your certificate from being cancelled.**

If you wish to cancel your certificate voluntarily and leave in good standing with the Commission, your company should pay the past due amount in full, complete the 2003 RAF return form, either pay the 2004 RAF or provide a date certain it will be paid, and comply with the requirements of Rule 25-24.474, Florida Administrative Code, copy enclosed. Any unpaid RAFs, including penalty and interest charges, are turned over to collections. When returning payment and a copy of the completed 2003 Regulatory Assessment Fee return form, please use the enclosed blue envelope, which will insure prompt processing.

If you have any questions, please contact me at (850) 413-6502, by fax at (850) 413-6503, by e-mail at pisler@psc.state.fl.us, or by writing to me at the address below.

Sincerely,

A handwritten signature in cursive script that reads "Paula J. Isler".

Paula J. Isler, Research Assistant
Bureau of Service Quality

Enclosures
TMS #1435

CAPITAL CIRCLE OFFICE CENTER • 2540 SHUMARD OAK BOULEVARD • TALLAHASSEE, FL 32399-0850

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PSC Website: <http://www.floridapsc.com>

Internet E-mail: contact@psc.state.fl.us

Interexchange Company Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return

TJ313-03-0-R
 Maxcess, Inc.
 P. O. Box 951419
 Lake Mary, FL 32795-1419

P. Isler

FOR PSC USE ONLY

Check# _____

\$ _____ 0603001
 _____ 003001

\$ _____ P
 _____ 0603001
 _____ 004011

\$ _____ I

Postmark Date _____

Initials of Preparer _____

PERIOD COVERED:
 01/01/2003 TO 12/31/2003

Please Complete Below If Official Mailing Address Has Changed

(Name of Company)	(Address)	(City/State)	(Zip)
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LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Long Distance Services	\$ _____	\$ _____
2.	Access Services	_____	_____
3.	Private Line Services	_____	_____
4.	Leased Facilities & Circuits Services	_____	_____
5.	Miscellaneous Services	_____	_____
6.	TOTAL Telephone Services	\$ _____	\$ _____
7.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	(_____)	(_____)
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation	_____	_____
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0015)	_____	_____
10.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____	_____
11.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____	_____
12.	TOTAL AMOUNT DUE	_____	\$ _____

* These amounts must be intrastate only and must be verifiable.

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

CURRENT COMPANY STATUS

() Facilities-Based Carrier () Reseller () Call Aggregator
 () Alternate-Operator Service () Rebiller () Other: _____

BILLING INFORMATION

Complete below if billing agent if other than yourself.

(Name) _____	(Address: City/State/Zip) _____	(Telephone) _____
What is the total amount of customer deposits collected? Amount: \$ _____ for 19 _____		What is the total amount of bond held (if applicable)? Amount: \$ _____ Expires: _____

COMPANY INFORMATION

Do you lease telecommunications' facilities? () YES () 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.

(Signature of Company Official) _____	(Title) _____	(Date) _____
(Preparer of Form - Please Print Name) _____	Telephone Number () _____	Fax Number () _____
	F.E.I. No. _____	

COMPANY IDENTIFICATION

Printed on 04/27/2004 at 11:52:57 by PJI

Complete Name: Maxcess, Inc.

Mailing Name: Maxcess, Inc.

Company Code: TJ313 FEID Number: 59-3551189

RAF ACCOUNT FOR THE PERIOD 01/01/2002 THROUGH 12/31/2002

Reg. Date: 01/11/2000 Inactive Date:
 Service: IXC - Interexchange Telephone
 Received: Actual RAF Form
 Status: Pending
 Amended: No Extension: No
 Frozen: No Comments: No
 Payment Count: 1 Payment Made to Date
 Operating Rev: \$0.00 Interstate Rev: \$0.00
 RAF Rate: 0.0015 Net RAF Due: \$50.00

Assessment	Due	Paid	Owe
RAF	\$50.00	\$50.00	\$0.00
Penalty	\$2.50	\$0.00	\$2.50
Interest	\$0.50	\$0.00	\$0.50
Extension Fee	\$0.00	\$0.00	\$0.00
Total	\$53.00	\$50.00	\$3.00

Last modification was made on Monday, February 10, 2003 at 10:46 AM by Jackie Knight

Period covered: 01/01/2002 through 12/31/2002 RAF rate: 0.0015
 Operating rev: \$0.00 Interstate rev: \$0.00
 Documents: Actual RAF form received on 01/31/2003
 RAF form mailed on 12/05/2002

Postmarked	Trans Date	Date Posted-By	Dep #	Check #	Check Amount
01/31/2003	02/07/2003	02/10/2003-JIK	IH304	1142	\$50.00
	RAF paid		IH304		\$50.00

25-24.474 Cancellation of a Certificate.

(1) The Commission may on its own motion cancel a company's certificate for any of the following reasons:

- (a) Violation of the terms and conditions under which the authority was originally granted;
- (b) Violation of Commission rule or order; or
- (c) Violation of Florida Statutes.

(2) If a certificated company desires to cancel its certificate, it shall request cancellation from the Commission in writing and shall provide the following with its request:

- (a) Statement of intent and date to pay Regulatory Assessment Fee.
- (b) Statement of why the certificate is proposed to be cancelled.
- (c) A statement on treatment of customer deposits and final bills.
- (d) Proof of individual customer notice regarding discontinuance of service.

(3) Cancellation of a certificate shall be ordered subject to the holder providing the information required by subsection (2).

Specific Authority: 350.127(2), F. S.

Law Implemented: 350.113, 350.127(1), 364.285, 364.337, 364.345, F.S.

History: New 2/23/87, amended 3/13/96.

TJ313-03-0-D

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none">Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.Print your name and address on the reverse so that we can return the card to you.Attach this card to the back of the mailpiece, or on the front if space permits.	A. Received by (Please Print Clearly) <i>MARIE DeLUCE</i>	B. Date of Delivery <i>3/12/04</i>
1. Article Addressed to: TJ313 Maxcess, Inc. P. O. Box 951419 Lake Mary, Florida 32795-1419	C. Signature <i>X Marie DeLuce</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS, Form 3811, March 2001	7002 0860 0001 1760 3928	
	Domestic Return Receipt	102595-01-M-1424

COMPANY IDENTIFICATION

Printed on 04/27/2004 at 11:53:05 by PJI

Complete Name: Maxcess, Inc.

Mailing Name: Maxcess, Inc.

Company Code: TJ313 FEID Number: 59-3551189

RAF ACCOUNT FOR THE PERIOD 01/01/2003 THROUGH 12/31/2003

Reg. Date: 01/11/2000 Inactive Date:
 Service: IXC - Interexchange Telephone
 Received: No RAF Form
 Status: Pending
 Amended: No Extension: No
 Frozen: No Comments: No
 Payment Count: 0 Payments Made to Date
 Operating Rev: \$0.00 Interstate Rev: \$0.00
 RAF Rate: Net RAF Due: \$0.00

Assessment	Due	Paid	Owe
RAF	\$0.00	\$0.00	\$0.00
Penalty	\$0.00	\$0.00	\$0.00
Interest	\$0.00	\$0.00	\$0.00
Extension Fee	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

Last modification was made on Wednesday, December 3, 2003 at 9:33 AM by David Brown

Period covered: 01/01/2003 through 12/31/2003
 Operating rev: \$0.00 Interstate rev: \$0.00
 Documents: Delinquent letter mailed on 02/20/2004
 Delinquent letter mailed on 02/19/2004
 Delinquent letter mailed on 02/18/2004
 RAF form mailed on 12/03/2003

MCD Company Information for TJ313

Printed on 04/23/2004 at 16:11:20 by PJI

Company Code: TJ313
Complete Name: Maxcess, Inc.
Mailing Name: Maxcess, Inc.
Certificate No(s): 7291
Status: Active
Regulation Date: 01/11/2000
Bankruptcy: No
Company Liaison #1: Jim Marchant
Title: President
Mailing Address: P. O. Box 951419

Physical Location: Lake Mary, FL 32795-1419
17201 Plantation Lakes Circle

Phone: Sanford, FL 32771-7355
(561) 361-6779
Fax: (561) 361-6363

Related Dockets:

991389-TI Application for certificate to provide interexchange telecommunications service by Maxcess, Inc.

991519-TP Notice by GTE Florida Incorporated of adoption of an approved interconnection, unbundling, and resale agreement between GTE Florida Incorporated and AT&T Communications of the Southern States, Inc. by Maxcess, Inc.