TO AVOID PE	Pay Telep	hone Service			· · · · · · · · · · · · · · · · · · ·	Return	10-	1
		Florida		Commission		FOR PSC US	E ONLY	
STATUS	S:		(See Filing Instructions on B		Check	#X = 36.	3	
Actu	ıal Return	TG294-05-0-R		a . 1	s	50,00	06=0	3-001
Estimated Return		"C" "DOS" J S	•	ems, Inc. R 15 K	,	Spena	003001	
Ame	ended Return	P. O. Box 230:		, , ,	\$	5 DEC 28	AM 10: 1	
PERIOI	O COVERED:	1	FL 34786-2305		-	COMMIS	06-00 00 11011	3-001 04011
	5 TO 12/31/2005	Vosse	CANCE	605 DEC	3F4. \$	CLER	K	
		1 / Paris,	SIFICATE	405 DEC	2 8 200	45	· · · · · · · · · · · · · · · · · · ·	,
		l cer		, 00,5520		of Preparer	120/05 VV	-
		Please Complete	Below If Official Mai	ling Address Has Char				
CDO	mary I Tu	Tre.	POI 2705	-	Willer	Ment	72/.7	4746
	(Name of Company)		(Address		(City/St		(Zip)	2 215
								
LINE			#- ⁴ +					
NO.		ACCOUNT	CLASSIFICATION	ON	 1	AM	OUNT	
1.	Gross Operating	Revenue (Florid	a)		ļ	\$	O	
			- ,					
2.	Gross Intrastate l	Revenue					$\underline{}$	
3.	LESS: Amounts Paid to Other Telecommunications Companies (1) (see "2. Fees" on back)							
4.	TOTAL REVER		latory Assessm	nent Fee Calcul	ation \mathcal{Z}_{q}	\$ } \$	0	
5.	Regulatory Asses	ssment Fee Due	- (Multiply Line	e 4 by 0.0020)	() 0		0	
6.	Penalty for Late	Payment (see "3.	. Failure to File	by Due Date" o	on back)	J ——	0	
7.	Interest for Late	Payment (see "3.	Failure to File	by Due Date" o	on back)	·	0_	
8.	Extension Paymo	ent Fee (see "4. E	Extension" on b	ack)	4		<u> </u>	
9.	TOTAL AMOU	INT DUE (MIN	HMUM \$50.00	0)	2	\$	0	. (2)
10.	Number of pay to this Return	elephones in ope	ration at close of	of period covere	d by		0	
	(1) These amounts must (2) Regardless of the gro Section 364.336, Flo	oss operating revenue of a	ust be verifiable (see "2 a company, a minimum	2. Fees" on back). n annual regulatory asse	ssment fee of \$50 sha	II be imposed as p	provided in	
T 41	1							
information	undersigned owner/officer of is a true and correct statem	nent. I am aware that pu	rsuant to Section 837.0	06, Florida Statutes, wh	oever knowingly mak	y knowledge and es a false statem	d belief the a	above g with
the intentito	o mislead a public servant in	the performance of his o	official duty shall be gu	ilty of a misdemeanor o	of the second degree.		, ,	
	orler Hola	00000	- Thei	(Title)		12	20/08 (Date)	
. ل	(Signature of Compan	y Official)						
I AN	es H. Heg	er	Telephone Nu	mber (407) 3	75-2600 Y Fax N	(775) (umber (775)	305-3	344
(P	reparer of Form - Pleas	se Print Name)				JMENT NUM		
			F.E.I. No			1000 *	<u> </u>	
			*		1	1755 ()EC 28 5	š