

ORIGINAL

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2006 Competitive Local Exchange Carrier (CLEC) Questionnaire

(Due by July 14, 2006)

06 JUN 12 PM 3:45

Legal Company Name: Unicom Communications Commission Clerk
D/B/A:
FPSC Company Code (e.g., TX000) TX 095
Contact name & title: Vickie Tallent, office mgr
Telephone number: 828 369 1599
E-mail address: htallent@sm.net
Stock Symbol (if company is publicly traded):

Services Offered in Florida

- 1. Do you offer local telephone service in Florida? Please check yes or no.
2. How is your local service provisioned? Please mark the appropriate response(s).
3. In what ILEC exchanges are you providing residential and/or business local service? Attached is the Exchange Check List (also available in electronic form) for your response.

- OMP
COM
CTR
ECR
GCL
OPC
RCA
SCR
SGA
SEC
OTH

4. If you provision local service ONLY through ILEC resale or the ILEC's wholesale platform (formerly known as UNE-P), you DO NOT need to complete the data tables. Please indicate below whether or not you have completed any data tables.

5. What services, other than local service, does your company offer in Florida? Check all that apply.
Private line/special access
VoIP
Wholesale transport
Interexchange service
Cellular/wireless service
Wholesale loops
Paging service
Cable television
Satellite television
Broadband Internet access

COMPETITIVE SERVICES DIVISION
2006 JUN -9 AM 11:22

DOCUMENT NUMBER-DATE
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6. This question concerns **prepaid** local telephone service in Florida. Please place a check mark by the response that most accurately reflects whether or not you offer prepaid local telephone service.

- Company offers ONLY prepaid local telephone service in Florida
- Company offers prepaid AND non-prepaid local telephone service in Florida
- Company does NOT offer prepaid local telephone service in Florida

Bundled Services

7. Do you offer bundled services to your Florida residential and business customers? For the purpose of this question, bundled services are specially priced packages that consist of local service plus at least one other feature (e.g., call waiting) or service (e.g., long distance or broadband or video). Please mark the applicable response(s).

- Yes - Residential
- No - Residential
- Yes - Business
- No - Business

8. If you do offer bundled services, what is the percentage of your Florida residential and business customers that can purchase the bundles? Please provide the percentage below. If you do not offer bundled services, place a mark by "not applicable."

- Residential
- Business
- Not applicable

9. If you do offer bundled services, what percentage of your Florida residential and business customers purchase the bundles? Please provide the percentage below. If you do not offer bundled services, place a mark by "not applicable."

- Residential
- Business
- Not applicable

VoIP

10. Indicate below whether you are offering VoIP service to end users in Florida. VoIP service is defined as IP-based voice service provided over a digital connection. Check any that apply.

- Not offering VoIP service to end users
- Offering VoIP services to business end users
- Offering VoIP services to residential end users

11. If you are offering VoIP service in Florida:

- a. Where are you offering VoIP service, e.g., specific cities, counties, statewide, etc.?

- b. What is the range of prices for residential VoIP service?

- c. What is the range of prices for business VoIP service?

- d. Check all that apply to your VoIP service:
 Offer wireless VoIP service
 Offer wireline VoIP service
 Optional power backup
 Standard power backup
 Contribute to Universal Service Fund
 Peer-to-Peer only (no interconnection with PSTN).
 Use of public Internet
 Use of private IP network
- e. If you are not offering VoIP service to end-user customers in Florida, do you anticipate doing so? If yes, identify rollout month/year.

Broadband

12. Do you offer broadband to residential customers in Florida? Please place a mark by the applicable answer.
 Yes
 No
13. If you do offer broadband to residential customers in Florida, please provide the percentage of customers to whom broadband is available.

14. How many residential broadband subscribers do you have in Florida?

FCC's Triennial Review Remand Order (TRRO)

15. As of March 11, 2005, please provide the total number of UNE-P access lines for your company that were affected by the above order. 0
16. As of March 11, 2006, please provide the number of UNE-P access lines that were transitioned in each of the categories below:
a. Migrated to a different platform (i.e., UNE-L or resale) _____
b. Renegotiated as part of a commercial agreement _____
c. No longer providing service _____
d. Not transitioned as of March 11, 2006, due to quantity, etc., but will be or has been transitioned to a different platform as subject to agreement with ILEC.
e. Other (please explain below)

Mergers

17. The following questions concern the mergers that have taken place recently (e.g., Sprint-Nextel, SBC and AT&T, and Verizon and MCI, as well as the recently announced AT&T purchase of BellSouth).
- Has your overall local competition strategy changed as a result of the completed mergers? If so, please explain how.
 - Have these mergers affected your local competition strategy in Florida? If so, please explain how.
 - How do you expect AT&T's purchase of BellSouth to affect your local competition strategy in Florida?

Miscellaneous

18. In 2005, how much money did you invest in your network directly serving Florida's local service customers? Place a check mark by the applicable answer.
- \$1 - \$249,999
 \$250,000 - \$999,999
 \$1,000,000 - \$9,999,999
 \$10,000,000 or more
19. Are you currently operating under Chapter 7 or Chapter 11 protection? Please indicate yes or no.
- Yes
 No
20. Please provide a copy of the Form 477 you filed with the FCC with data as of December 31, 2005.

Comments

21. Have you experienced any significant barriers in entering Florida's local exchange markets? Please list and describe any major obstacles or barriers encountered that you believe may be impeding the growth of local competition in the state, along with any suggestions as to how to remove such obstacles. Any additional general comments or information you believe will assist staff in evaluating and reporting on the development of local exchange competition in Florida are welcome.

copy

2006 FCC Form 499-A Telecommunications Reporting Worksheet (Reporting Calendar 2005 Revenues)

Approval by OMB 3060-0855

>>> Please read instructions before completing. <<<

Annual Filing - due April 1, 2006

Block 1: Contributor Identification Information

During the year, carriers must refile Blocks 1, 2 and 6 if there are any changes in Lines 104 or 112. See instructions.

101 Filer 499 ID [If you don't know your number, contact the administrator at (888) 641-8722. If you are a new filer, write "new" in this block and a Filer 499 ID will be assigned to you.]

New

102 Legal name of reporting entity

Unicom Communications, LLC

103 IRS employer identification number

[Enter 9 digit number] 65-0733066

104 Name telecommunications service provider is doing business as

Unicom Communications, LLC

105 Telecommunications activities of filer [Select up to 5 boxes that best describe the reporting entity. Enter numbers starting with "1" to show the order of importance -- see directions.]

- Grid of checkboxes for telecommunications activities: All Distance, CAP/CLEC, Cellular/PCS/SMR, Coaxial Cable, Incumbent LEC, Interexchange Carrier (IXC), Local Reseller, Operator Service Provider (OSP), Payphone Service Provider, Prepaid Card, Private Service Provider, Shared-Tenant Service Provider / Building LEC, SMR (dispatch), Toll Reseller, Wireless Data.

If Other Local, Other Mobile or Other Toll is checked, describe carrier type / services provided: Other Local, Other Mobile, Other Toll

106.1 Holding company name (All affiliated companies must show the same name on this line.)

none

106.2 Holding company IRS employer identification number

[Enter 9 digit number] none

107 FCC Registration Number (FRN) [https://svartifoss2.fcc.gov/cores/CoresHome.html] [For assistance, contact the CORES help desk at 877-480-3201 or CORES@fcc.gov]

[Enter 10 digit number] 0014-9946-02

108 Management company [if carrier is managed by another entity]

109 Complete mailing address of reporting entity corporate headquarters

Note: this address will be used for the ITSP FCC regulatory fee billings unless the appropriate box is checked on Line 208.

Street1 17 Smoky Mountain Drive, Street2, Street3, City Franklin, State NC, Zip (postal code) 28784, Country if not USA

110 Complete business address for customer inquiries and complaints

check if same address as Line 109 [X]

Street1, Street2, Street3, City, State, Zip (postal code), Country if not USA

111 Telephone number for customer complaints and inquiries [Toll-free number if available]

(888)-714-9444 ext -

112 List all trade names used in the past 3 years in providing telecommunications. Include all names by which you are known by customers.

Table with columns a-f and g-l. Row a: none

Use an additional sheet if necessary. Each reporting entity must provide all names used for carrier activities.

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FCC Form 499-A April 2006

Block 2-A: Regulatory Contact Information

201 Filer 499 ID [from Line 101]	
202 Legal name of reporting entity [from Line 102]	New Unicorn Communications, LLC
203 Person who completed this Worksheet	First Vickie MI L Last Tallent
204 Telephone number of this person	(828)-369 1599 ext-210
205 Fax number of this person	(828)-369 0910
206 Email of this person Required if available	vtallent@smnet.net
207 Corporate office, attn. name, and mailing address to which future Telecommunications Reporting Worksheets should be sent check if same name as Line 203 <input checked="" type="checkbox"/> check if same address as Line 109 <input checked="" type="checkbox"/>	Office Attn First name MI Last Email [required if available] Phone () - ext- Fax () - Street1 Street2 Street3 City State Zip (postal code) Country if not USA
208 Billing address and billing contact person: [Plan administrators will send bills for contributions to this address. Please attach a written request for alternative billing arrangements.] check if name and address same as Line 207 <input checked="" type="checkbox"/> check to use Line 208 information for FCC ITSP regulatory fee bill <input checked="" type="checkbox"/>	Company Attn First name MI Last Email [required if available] Phone () - ext- Fax () - Street1 Street2 Street3 City State Zip (postal code) Country if not USA

Block 2-B: Agent for Service of Process

All carriers must complete Lines 209 through 213.
During the year, carriers must refile Blocks 1, 2 and 6 if there are any changes in this section. See Instructions.

209 D.C. Agent for Service of Process per 47 U.S.C. § 413	Company McGuire Woods, LLP Attn First name Tony MI S Last Leve
210 Telephone number of D.C. agent	(202)-857-1707 ext-
211 Fax number of D.C. agent	(202)-828-2973
212 Email of D.C. agent Required if available	tlee@McGuireWoods.com
213 Complete business address of D.C. agent for hand service of documents	Street1 1050 Connecticut Avenue NW Street2 Suite 1200 Street3 City Washington State DC Zip 20036-5317
214 Local/alternate Agent for Service of Process (optional)	Company Attn First name MI Last
215 Telephone number of local/alternate agent	() - ext -
216 Fax number of local/alternate agent	() -
217 Email of local/alternate agent Required if available	
218 Complete business address of local/alternate agent for hand service of documents	Street1 Street2 Street3 City State Zip (postal code) Country if not USA

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Block 2-C: FCC Registration and Contact Information

Carriers must refile Blocks 1, 2 and 6 if there are any changes in this section. See Instructions.

219 Filer 499 ID [from Line 101]	New		
220 Legal name of reporting entity [from Line 102]	Unicom Communications, LLC		
221 Chief Executive Officer (or, highest ranking company officer if the filing entity does not have a chief executive officer)	First Charles	MI D	Last D'Ascoli
222 Business address of individual named on Line 221 check if same as Line 109 <input checked="" type="checkbox"/>	Street1 Street 2 Street 3 City	State Zip (postal code)	Country if not USA
223 Second ranking company officer, such as Chairman (Must be someone other than the individual listed on Line 221)	First Dennis	MI	Last Parker
224 Business address of individual named on Line 223 check if same as Line 109 <input type="checkbox"/>	Street1 Street 2 Street 3 City	State FL	Zip (postal code) 33065 Country if not USA
225 Third ranking company officer, such as President or Secretary (Must be someone other than individuals listed on Lines 221 or 223)	First Samuel	MI L	Last Fiske
226 Business address of individual named on Line 225 check if same as Line 109 <input checked="" type="checkbox"/>	Street1 Street 2 Street 3 City	State Zip (postal code)	Country if not USA

227 Indicate jurisdictions in which the filing entity provides telecommunications service. Include jurisdictions in which telecommunications service was provided in the past 15 months and jurisdictions in which telecommunications service is likely to be provided in the next 12 months.

- | | | | | |
|---|---|--|--|--|
| <input type="checkbox"/> Alabama | <input type="checkbox"/> Guam | <input type="checkbox"/> Massachusetts | <input type="checkbox"/> New York | <input type="checkbox"/> Tennessee |
| <input type="checkbox"/> Alaska | <input type="checkbox"/> Hawaii | <input type="checkbox"/> Michigan | <input checked="" type="checkbox"/> North Carolina | <input type="checkbox"/> Texas |
| <input type="checkbox"/> American Samoa | <input type="checkbox"/> Idaho | <input type="checkbox"/> Midway Atoll | <input type="checkbox"/> North Dakota | <input type="checkbox"/> Utah |
| <input type="checkbox"/> Arizona | <input type="checkbox"/> Illinois | <input type="checkbox"/> Minnesota | <input type="checkbox"/> Northern Mariana Islands | <input type="checkbox"/> U.S. Virgin Islands |
| <input type="checkbox"/> Arkansas | <input type="checkbox"/> Indiana | <input type="checkbox"/> Mississippi | <input type="checkbox"/> Ohio | <input type="checkbox"/> Vermont |
| <input type="checkbox"/> California | <input type="checkbox"/> Iowa | <input type="checkbox"/> Missouri | <input type="checkbox"/> Oklahoma | <input type="checkbox"/> Virginia |
| <input type="checkbox"/> Colorado | <input type="checkbox"/> Johnston Atoll | <input type="checkbox"/> Montana | <input type="checkbox"/> Oregon | <input type="checkbox"/> Wake Island |
| <input type="checkbox"/> Connecticut | <input type="checkbox"/> Kansas | <input type="checkbox"/> Nebraska | <input type="checkbox"/> Pennsylvania | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Delaware | <input type="checkbox"/> Kentucky | <input type="checkbox"/> Nevada | <input type="checkbox"/> Puerto Rico | <input type="checkbox"/> West Virginia |
| <input type="checkbox"/> District of Columbia | <input type="checkbox"/> Louisiana | <input type="checkbox"/> New Hampshire | <input type="checkbox"/> Rhode Island | <input type="checkbox"/> Wisconsin |
| <input checked="" type="checkbox"/> Florida | <input type="checkbox"/> Maine | <input type="checkbox"/> New Jersey | <input type="checkbox"/> South Carolina | <input type="checkbox"/> Wyoming |
| <input type="checkbox"/> Georgia | <input type="checkbox"/> Maryland | <input type="checkbox"/> New Mexico | <input type="checkbox"/> South Dakota | |

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FCC Form 499-A

April 2006

Block 3: Carrier's Carrier Revenue Information

301 Filer 499 ID [from Line 101]	New			
302 Legal name of reporting entity [from Line 102]	unicom communications LLC			
Report billed revenues for January 1 through December 31, 2005. Do not report any negative numbers. Dollar amounts may be rounded to the nearest thousand dollars. However, report all amounts as whole dollars.	Total Revenues (a)	If breakouts are not book amounts, enter whole percentage estimates		Breakouts
See instructions regarding percent interstate & international.		Interstate (b)	International (c)	Interstate Revenues (d) International Revenues (e)
Revenues from Services Provided for Resale as Telecommunications by Other Contributors to Federal Universal Service Support Mechanisms				
<i>Fixed local service</i>				
Monthly service, local calling, connection charges, vertical features, and other local exchange service including subscriber line and PICC charges to IXC's				
303.1 Provided as unbundled network elements (UNEs)				
303.2 Provided under other arrangements				
Per-minute charges for originating or terminating calls				
304.1 Provided under state or federal access tariff				
304.2 Provided as unbundled network elements or other contract arrangement				
305 Local private line & special access service				
306 Payphone compensation from toll carriers				
307 Other local telecommunications service revenues				
308 Universal service support revenues received from Federal or state sources				
<i>Mobile services (including wireless telephony, paging & messaging, and other mobile services)</i>				
309 Monthly, activation, and message charges except toll				
<i>Toll services</i>				
310 Operator and toll calls with alternative billing arrangements (credit card, collect, international call-back, etc.)				
311 Ordinary long distance (direct-dialed MTS, customer toll-free (800/888 etc.) service, "10-10" calls, associated monthly account maintenance, PICC pass-through, and other switched services not reported above)				
312 Long distance private line services				
313 Satellite services				
314 All other long distance services				

Note: As stated in the instructions, for all revenues reported on this page, you must retain the Filer 499 ID and contact information for the associated customers. You must verify that each of these customers was a direct contributor to the federal universal service support mechanism for calendar year 2005 and that the customer is purchasing service for resale as telecommunications. These records must be made available to the administrator or the FCC upon request. The FCC website contains information on federal universal service contributors. (See instructions.)

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FCC Form 499-A
April 2006

Block 4-A: End-User and Non-Telecommunications Revenue Information

401 Filer 499 ID [from Line 101]	New				
402 Legal name of reporting entity [from Line 102]	Unicom Communications, LLC				
Report billed revenues for January 1 through December 31, 2005. Do not report any negative numbers. Dollar amounts may be rounded to the nearest thousand dollars. However, report all amounts as whole dollars. See instructions regarding percent interstate & international.	Total Revenues (a)	If breakouts are not book amounts, enter whole percentage estimates		Breakouts	
		Interstate (b)	International (c)	Interstate Revenues (d)	International Revenues (e)
Revenues from All Other Sources (end-user telecom. & non-telecom.)					
403 Surcharges or other amounts on bills identified as recovering State or Federal universal service contributions					
<i>Fixed local services</i>					
Monthly service, local calling, connection charges, vertical features, and other local exchange service charges except for federally tariffed subscriber line charges and PICC charges					
404.1 Provided at a flat rate including interstate toll service	1,020,000				
404.2 Provided without interstate toll included (see instructions)					
405 Tariffed subscriber line charges and PICC charges levied by a local exchange carrier on a no-PIC customer	164,000				
406 Local private line & special access service					
407 Payphone coin revenues (local and long distance)					
408 Other local telecommunications service revenues					
<i>Mobile services (including wireless telephony, paging & messaging, and other mobile services)</i>					
409 Monthly and activation charges					
410 Message charges including roaming, but excluding toll charges					
<i>Toll services</i>					
411 Prepaid calling card (including card sales to customers and non-carrier distributors) reported at face value of cards					
412 International calls that both originate and terminate in foreign points		0%	100%		
413 Operator and toll calls with alternative billing arrangements (credit card, collect, international call-back, etc.) other than revenues reported on Line 412					
414 Ordinary long distance (direct-dialed MTS, customer toll-free (800/888 etc.) service, "10-10" calls, associated monthly account maintenance, PICC pass-through, and other switched services not reported above)	167,000			103,000	5,900
415 Long distance private line services					
416 Satellite services					
417 All other long distance services					
418 Revenues other than U.S. telecommunications revenues, including information services, inside wiring maintenance, billing and collection customer premises equipment, published directory, dark fiber, Internet access, cable TV program transmission, foreign carrier operations, and non-telecommunications revenues (See instructions.)	36,000				

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FCC Form 499-A

April 2006

2006 FCC Form 499-A Telecommunications Reporting Worksheet (Reporting Calendar 2005 Revenues)

Block 4-B: Total Revenue and Uncollectible Revenue Information

	Total Revenues (a)	Breakouts	
		Interstate Revenues (d)	International Revenues (e)
419 Gross billed revenues from all sources (incl. reseller & non-telecom.) [Lines 303 through 314 plus Lines 403 through 418]	1,387,000	103,000	5,900
420 Gross universal service contribution base amounts [Lines 403 through 411 Lines 413 through 417] See Figure 4 in instructions.	1,351,000	103,000	5,900
421 Uncollectible revenue/bad debt expense associated with gross billed revenues amounts shown on Line 419 [See Instructions Page 26]			
422 Uncollectible revenue/bad debt expense associated with universal service contribution base amounts shown on Line 420			
423 Net universal service contribution base revenues [Line 420 minus line 422]			

Block 5: Additional Revenue Breakouts

501 Filer 499 ID [from Line 101]	New
502 Legal name of reporting entity [from Line 102]	Unicom Communications, LLC

Filers that report revenues in Block 3 and Block 4 must provide the percentages requested in Lines 503 through 510. See page 27 of instructions for limited exceptions.

Percentage of revenues reported in Block 3 and Block 4 billed in each region of the country. Round or estimate to nearest whole percentage. Enter 0 if no service was provided in the region.

	Block 3 Carrier's Carrier (a)	Block 4 End-User Telecom. (b)
503 Southeast: Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, Puerto Rico, South Carolina, Tennessee, and U.S. Virgin Islands	%	100 %
504 Western: Alaska, Arizona, Colorado, Idaho, Iowa, Minnesota, Montana, Nebraska, New Mexico, North Dakota, Oregon, South Dakota, Utah, Washington, and Wyoming	%	%
505 West Coast: California, Hawaii, Nevada, American Samoa, Guam, Johnston Atoll, Midway Atoll, Northern Mariana Islands, and Wake Island.	%	%
506 Mid-Atlantic: Delaware, District of Columbia, Maryland, New Jersey, Pennsylvania, Virginia, and West Virginia	%	%
507 Mid-West: Illinois, Indiana, Michigan, Ohio, and Wisconsin	%	%
508 Northeast: Connecticut, Maine, Massachusetts, New Hampshire, New York, Rhode Island, and Vermont	%	%
509 Southwest: Arkansas, Kansas, Missouri, Oklahoma, and Texas	%	%
510 Total [Percentages must add to 0 or 100.]	0 %	100 %

511 Revenues from resellers that do not contribute to Universal Service support mechanisms are included in Block 4-B, Line 420 but may be excluded from a filer's TRS, NANPA, LNP, and FCC interstate telephone service provider regulatory fee contribution bases. To have these amounts excluded, the filer has the option of identifying such revenues below. As stated in the instructions, you must have in your records the FCC Filer 499 ID for each customer whose revenues are included on Line 511. (See instructions.)

	(a) Total Revenues	(b) Interstate and International
Revenues from resellers that do not contribute to Universal Service	\$ 0	\$ 0

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Block 6: CERTIFICATION: to be signed by an officer of the filer

601 Filer 499 ID [from Line 101]	new
602 Legal name of reporting entity [from Line 102]	Unicom Communications, LLC

Section IV of the instructions provides information on which types of reporting entities are required to file for which purposes. Any entity claiming to be exempt from one or more contribution requirements should so certify below and attach an explanation. [The Universal Service Administrator will determine which entities meet the *de minimis* threshold based on information provided in Block 4, even if you fail to so certify, below.]

603 I certify that the reporting entity is exempt from contributing to: Universal Service TRS NANPA LNP Administration

Provide explanation below:

Fees where billed by and paid to BTI + MCI

604 Please indicate whether the reporting entity is State or Local Government Entity I.R.C. § 501Tax Exempt PUHCA § 34 (a)(1) Exempt

605 I certify that the revenue data contained herein are privileged and confidential and that public disclosure of such information would likely cause substantial harm to the competitive position of the company. I request nondisclosure of the revenue information contained herein pursuant to Sections 0.459, 52.17, 54.711 and 64.604 of the Commission's Rules.

I certify that I am an officer of the above-named reporting entity as defined on page 28 of the instructions, that I have examined the foregoing report and, to the best of my knowledge, information and belief, all statements of fact contained in this Worksheet are true and that said Worksheet is an accurate statement of the affairs of the above-named company for the previous calendar year. In addition, I swear, under penalty of perjury, that all requested identification registration information has been provided and is accurate. If the above-named reporting entity is filing on a consolidated basis, I certify that this filing incorporates all of the revenues for the consolidated entities for the entire year and that the filer adhered to and continues to meet the conditions set forth in Section II-B of the instructions.

606 Signature	
607 Printed name of officer	First Charles MI D Last D'Ascoli
608 Position with reporting entity	
609 Business telephone number of officer	(828) 3696067 ext - 202
610 Email of officer Required if available	clom@smnet.net
611 Date	
612 Check those that apply:	<input checked="" type="checkbox"/> Original April 1 filing for year <input type="checkbox"/> New filer, registration only <input type="checkbox"/> Revised filing with updated registration <input type="checkbox"/> Revised filing with updated revenue data

Do not mail checks with this form. Send this form to: Form 499 Data Collection Agent c/o USAC 2000 L Street, N.W. Suite 200 Washington DC, 20036
 For additional information regarding this worksheet contact: Telecommunications Reporting Worksheet information: (888) 641-8722 or via email: Form499@universalservice.org

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