

070352-TX

Fax

07 JUL -2 AM 7:25

RECEIVED-FPSC

COMMISSIONER
CLERK

To: Florida Public Service Commission From: Sharon Litke 214-630-6700 ext 120

Fax: 850-413-7118 Pages: 3

Phone: Date: 6/29/2007

CLEC Regulatory Assesment Fee return CC:

Account of Texas

Please find attached the return which was sent to your office in April. (Can you please verify since we received a notice today regarding Docket NO. 070652-TX issued June 29, 2007.

Urgent For Review Please Comment Please Reply Please Recycle

7/10/07.

This is taken care of,
David B called, and she is
working with P. Isler
in resolution of this
matter.

Ruth.

left message
on answering
machine - unacceptable
Fax - needs to be
re-faxed.
7-3-07
11:30

DOCUMENT NUMBER-DATE

06834 AUG-7 6

FPSC-COMMISSION CLERK

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 10/30/2007

Competitive Local Exchange Company Regulatory Assessment Fee Return

Florida Public Service Commission

(See filing instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:

01/01/2006 to 12/31/2006

TX377-06-0-R
 AccuTel of Texas, Inc.
 P. O. Box 560803
 Dallas, TX 75356-0803

FOR PSC USE ONLY

Check # _____
 \$ _____ 06-03-001
 _____ 003001
 \$ _____ C
 \$ _____ P 06-03-001
 _____ 004011
 \$ _____ I
 Postmark Date _____
 Initials of Preparer _____

Please Complete Below if Official Mailing Address Has Changed

Accutel of Texas 7900 CARPENTER FERRY DALLAS TX 75247
 (Name of Company) (Address) (City/State) (Zip)

LINE NO	ACCOUNT CLASSIFICATION	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Basic Local Services	\$ <u>NA</u>	\$ <u>NA</u>
2.	Long Distance Services (Intral.ATA only)	\$ <u>NA</u>	\$ <u>NA</u>
3.	Access Services	\$ <u>NA</u>	\$ <u>NA</u>
4.	Private Line Services	\$ <u>NA</u>	\$ <u>NA</u>
5.	Leased Facilities & Circuits Services	\$ <u>NA</u>	\$ <u>NA</u>
6.	Miscellaneous Services	\$ <u>NA</u>	\$ <u>NA</u>
7.	TOTAL REVENUES	\$ <u>NA</u>	\$ <u>NA</u>
8.	LESS: Amounts Paid to Other Telecommunications Companies		\$ <u>NA</u>
9.	NET INTRASTATE OPERATING REVENUE for Regulatory Assessment Fee Calculation (Line 7 less Line 8)		\$ <u>NA</u>
10.	Regulatory Assessment Fee Due (Multiply Line 9 by 100.2%)		\$ <u>NA</u>
11.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)		\$ <u>NA</u>
12.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)		\$ <u>NA</u>
13.	Extension Payment Fee (see "4. Extension" on back)		\$ <u>NA</u>
14.	TOTAL AMOUNT DUE (\$50 MINIMUM)		\$ <u>NA</u>

(1) Other long distance revenue must be listed on the Interexchange Regulatory Assessment Fee Return.
 (2) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back).
 (3) Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$50 shall be imposed as provided in Section 364.336, Florida Statutes.

CURRENT COMPANY STATUS

- Facilities-Based Provider Reseller
 Other

BILLING INFORMATION

Complete below if billing agent is other than yourself

(Name) _____ (Address, City/State/Zip) _____ (Telephone) _____

COMPANY INFORMATION

Do you lease telecommunications facilities? YES NO
 IF YES, who do you lease these facilities from? Name: WE ARE NOT CONDUCTING BUSINESS IN FLORIDA
 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 official duty shall be guilty of a misdemeanor of the second degree.

[Signature]
 (Signature of Company Officer)

CFO
 (Title)

4/27/07
 (Date)

SHARON LITTE
 (Preparer of Form - Please Print Name)

Telephone Number: 214 630 6700 Fax Number: 214-678-9429
 x 120

F.I.L. No. 75-2678211

ou

FLORIDA PUBLIC SERVICE COMMISSION
Instructions For Filing Regulatory Assessment Fee Return
(Competitive Local Exchange Company)

- 1. **WHEN TO FILE:** For companies which owed a total of \$10,000 or more of assessment fee for the preceding calendar year, this Regulatory Assessment Fee Return is required twice a year and payment must be filed or postmarked:

On or before July 30 for the six-month period January 1 through June 30, and
On or before January 30 for the six-month period July 1 through December 31.

For companies which owed a total of less than \$10,000 of assessment fee for the preceding calendar year, this Regulatory Assessment Fee Return and payment must be filed or postmarked:

On or before January 30 for the prior twelve-month period January 1 through December 31.

However, when July 30 or January 30 falls on a Saturday, Sunday, or holiday, the Regulatory Assessment Fee Return may be filed or postmarked on the next business day, with no penalty or interest.

- 2. **FEE:** Each company shall pay 0.0420 of its gross operating revenues derived from intrastate business, as referenced in Rule 25-4.0161(F), F.A.C. Gross Operating Revenues are defined as the total revenues before expenses. Gross Intrastate Operating Revenues are defined as revenues from calls originating and terminating within Florida. Do not deduct any expenses, taxes, or uncollectibles from these amounts.

On Line 8, deduct any amounts paid to another telecommunications company for the use of any telecommunications network to provide service to its customers. Do not deduct any taxes, federal subscriber line charges, interstate long distance access charges, or amounts paid for non-regulated services such as voice mail, inside wire maintenance, or equipment purchases/rentals. DEDUCTIONS MUST BE INTRASTATE ONLY AND MUST BE VERIFIABLE.

- 3. **FAILURE TO FILE BY DUE DATE:** Failure to file a return by the established due date will result in a penalty being added to the amount of fee due, 5% for each 30 days or fraction thereof, not to exceed a total penalty of 25% (Line 11). In addition, interest shall be added in the amount of 1% for each 30 days or fraction thereof, not to exceed a total of 12% per year (Line 12). A Regulatory Assessment Fee Return must be completed, signed, and filed even if there are no revenues to report or if the minimum amount is due.

When a company fails to file the Regulatory Assessment Fee Return, the Commission has the authority to order the company to pay a penalty on or after the company's certificate. The company will have an opportunity to respond to any proposed Commission action.

- 4. **EXTENSION:** A request for an extension of time up to 30 days may be made by filing the enclosed *Regulatory Assessment Fee Extension Request* form. (PSC/CMP/07/0005) made prior to the filing date. When an extension is granted, a charge shall be added to the amount due (Line 13).

0.75% of the fee to be remitted for an extension of 15 days or less, or
1.5% of the fee for an extension of 15 to 30 days.

In lieu of paying the charges outlined above, a company may file a return and remit payment based upon estimated gross operating revenues. If such return is filed by the normal due date, the company shall be granted a 30-day extension period in which to file and remit the actual fee due without paying the above charges, provided the estimated fee payment remitted is at least 90% of the actual fee due for the period. An additional 30-day extension to file an actual return may be obtained by checking the "Estimated Return" space in the top left-hand corner of the true size sheet.

- 5. **FEE ADJUSTMENTS:** You will be notified as to the amount and reason for any fee adjustment. Penalty and interest charges may be applicable to additional amounts owed the Commission as a result of the adjustment. The company may file a written request for a refund of any overpayment. This request should be filed with Fiscal Services at the below-referenced address.

- 6. **MAILING INSTRUCTIONS:** Please complete this form, make a copy for your files, and return the original in the enclosed preaddressed envelope. Use of this envelope should insure a more accurate and expeditious recording of your payment. Make your check payable to the Florida Public Service Commission. If you are unable to use the enclosed envelope, please address your remittance as follows:

Florida Public Service Commission
 2740 South U.S. 1
 Tallahassee, FL 32309-0850
 ATTENTION: Fiscal Services

- 7. **ADDITIONAL ASSISTANCE:** If you need additional assistance in preparing your Regulatory Assessment Fee Return or regarding telecommunications facilities, please contact the Division of Competitive Markets and Enforcement at (850) 413-6600. This division may be contacted at the above-referenced address, or by sending correspondence to the attention of the division.