

**Pay Telephone Service Provider Regulatory Assessment Fee Return**

080090 -TC

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return

TH055-07-0-R  
 Joltran Communications Corp.  
 4771 Wickerwood Drive  
 St. Louis, MO 63129-2456  
**DEPOSIT DATE**  
 8 20 FEB 20 2008  
 11

**FOR PSC USE ONLY**

Check # 12655  
 \$ 100.00 06-03-001 003001  
 \$ \_\_\_\_\_ E  
 \$ 5.00 P 06-03-001 004011  
 \$ 1.00 I  
 Postmark Date 2/6/08  
 Initials of Preparer RT

PERIOD COVERED:  
 01/01/2007 TO 12/31/2007

*Paula + Records*

Please Complete Below If Official Mailing Address Has Changed

\_\_\_\_\_  
 (Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ <u>0</u>
2.	Gross Intrastate Revenue	<u>0</u>
3.	LESS: Amounts Paid to Other Telecommunications Companies <sup>(1)</sup> (see "2. Fees" on back)	( <u>0</u> )
4.	<b>TOTAL REVENUES for Regulatory Assessment Fee Calculation</b> (Line 2 less Line 3)	\$ <u>0</u>
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0020)	<u>0</u>
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	<u>1</u>
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	<u>1</u>
8.	Extension Payment Fee (see "4. Extension" on back)	<u>1</u>
9.	<b>TOTAL AMOUNT DUE (MINIMUM \$100.00)</b>	\$ <u>100.00</u>
10.	Number of pay telephones in operation at close of period covered by this Return	<u>0</u>

(1) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back).  
 (2) Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$100 shall be imposed as provided in Section 364.336, Florida Statutes.

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.

*James E. Nesselhauf* PRESIDENT 1/31/08  
 (Signature of Company Official) (Title) (Date)

JAMES E. NESSELHAUF  
 (Preparer of Form - Please Print Name) Telephone Number (314) 845-9850 Fax Number (314) 845-3575

F.E.I. No. 43-1736559

DOCUMENT NUMBER - DATE  
 01016 FEB 11 08  
 FPSC-COMMISSION CLERK



080090-TC

*Complete Pay Telephone Service*  
5541 Oakville Center, #117 \* St. Louis, MO 63129-3554 \* (314) 845-9850 \* fax (314) 845-3575

February 4, 2008

Attn: Fiscal  
Florida Public Service Commission  
2540 Shumard Oak Boulevard  
Tallahassee, FL 32399-0876

RE: Certificate Cancellation  
Certificate No. 8606  
Company Code TH055

Dear Sir or Madam:

Enclosed is our Pay Telephone Service Provider Regulatory Assessment Fee return along with our check in the amount of \$106.00.

We would like to CANCEL this certificate effectively immediately.

If you have any questions, please call us at 314-845-9850.

Sincerely,

A handwritten signature in cursive script that reads "James E. Nesselhauf". The signature is written in dark ink and is positioned above the printed name and title.

James E. Nesselhauf  
President

/jlg  
Enc.

DOCUMENT NUMBER-DATE

01016 FEB 11 8

FPSC-COMMISSION CLERK