

Pay Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
01/01/2008 TO 12/31/2008

Receives

TG718-08-0-R Thomas J. Neaman, Jr. 1479 North Endicott Point Crystal River, FL 34429-2678 Docket No. 080087-TEPOS DATE 867 - SEP 08 2008

Please Complete Below If Official Mailing Address Has Changed

FOR PSC USE ONLY	
Check #	1688
\$	100.00 06-03-001 003001
\$	E 06-03-001 004011
\$	P 06-03-001 004011
\$	I
Postmark Date	8/27/08
Initials of Preparer	TS

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

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ 253.31
2.	Gross Intrastate Revenue	136.11
3.	LESS: Amounts Paid to Other Telecommunications Companies ⁽¹⁾ (see "2. Fees" on back)	(- 0 -)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ 136.11
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0020)	
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	- 0 -
COM ECR	7. Interest for Late Payment (see "3. Failure to File by Due Date" on back)	- 0 -
GCL	8. Extension Payment Fee (see "4. Extension" on back)	- 0 -
OPC RCP	9. TOTAL AMOUNT DUE (MINIMUM \$100.00)	\$ 100.00 ⁽²⁾
SSG	10. Number of pay telephones in operation at close of period covered by this Return	4

(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.

Thomas J. Neaman, Jr. (Signature of Company Official) Owner (Title) 8/27/08 (Date)

THOMAS J. NEAMAN, JR. (Preparer of Form - Please Print Name) Telephone Number (352) 586-7126 Fax Number ()

F.E.I. No. N/A DOCUMENT NUMBER-DATE 08052 SEP-28