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CLASS "C"

WATER AND/OR WASTEWATER UTILITIES

(Gross Revenue of Less Than \$200,000 Each)

ANNUAL REPORT

OF

WU111-05-AR
Holiday Utility Company, Inc.
P. O. Box 398
New Port Richey, FL 34656-0398

Submitted To The

STATE OF FLORIDA



PUBLIC SERVICE COMMISSION

FOR THE

YEAR ENDED DECEMBER 31, 2005

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FINANCIAL SECTION

REPORT OF

HOLIDAY UTILITY COMPANY, INC.

(EXACT NAME OF UTILITY)

P.O. BOX 398 NEW PORT RICHEY, FL 34656	PASCO
Mailing Address	Street Address County

Telephone Number (727) 848-8292 Date Utility First Organized 7/28/69

Fax Number (727) 848-7701 E-mail Address _____

Sunshine State One-Call of Florida, Inc. Member No. _____

Check the business entity of the utility as filed with the Internal Revenue Service:

Individual Sub Chapter S Corporation 1120 Corporation Partnership

Name, Address and phone where records are located: VICTORIA PENICK
(727) 848-8292

Name of subdivisions where services are provided: WESTWOOD SUBDIVISION - ANCLOTE VILLAGE

CONTACTS:

Name	Title	Principle Business Address	Salary Charged Utility
Person to send correspondence: <u>GARY DEREMER</u>	<u>PRESIDENT</u>	<u>SAME</u>	
Person who prepared this report: <u>J. S. BAILLIE, JR., CPA</u>	<u>(SEE ACCOUNTANT'S COMPILATION REPORT)</u>		
Officers and Managers: <u>GARY DEREMER</u>	<u>PRESIDENT</u>	<u>SAME</u>	\$ <u>12,000</u>
<u>VICTORIA PENICK</u>	<u>ADMIN. SERVICES</u>	<u>SAME</u>	\$ <u>-</u>
_____	<u>DIRECTOR</u>	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

Report every corporation or person owning or holding directly or indirectly 5 percent or more of the voting securities of the reporting utility:

Name	Percent Ownership in Utility	Principle Business Address	Salary Charged Utility
<u>HOLIDAY WATERWORKS CORPORATION</u>	<u>100%</u>	<u>SAME</u>	\$ <u>-</u>
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

UTILITY NAME: HOLIDAY UTILITY COMPANY, INC.

YEAR OF REPORT DECEMBER 31, 2005

INCOME STATEMENT

Account Name	Ref. Page	Water	Wastewater	Other	Total Company
Gross Revenue:					
Residential_____		\$ 52,254	\$ N/A	\$ -	\$ 52,254
Commercial_____		9,327			9,327
Industrial_____					
Multiple Family_____					
Guaranteed Revenues_____					
Other (Specify)_____		8,370			8,370
Total Gross Revenue_____		\$ 69,951	N/A	-	69,951
Operation Expense (Must tie to pages W-3 and S-3)	W-3 S-3	\$ 97,689	\$	\$	\$ 97,689
Depreciation Expense_____	F-5	20,474			20,474
CIAC Amortization Expense_____	F-8	(4,691)			(4,691)
Taxes Other Than Income_____	F-7	3,960			3,960
Income Taxes_____	F-7			5,765	5,765
Total Operating Expense		\$ 117,432	N/A	5,765	\$ 123,197
Net Operating Income (Loss)		\$ (47,481)	\$ N/A	\$ (5,765)	\$ (53,246)
Other Income:					
Nonutility Income_____		\$	\$	\$ 5,904	\$ 5,904
Sale of Service Area				378,400	378,400
Other Deductions:					
Miscellaneous Nonutility Expenses_____		\$	\$	\$	\$
Interest Expense_____		218			218
Litigation Costs				72,879	72,879
Net Income (Loss)		\$ (47,699)	\$ N/A	\$ 305,660	\$ 257,961

UTILITY NAME: HOLIDAY UTILITY COMPANY, INC.

YEAR OF REPORT DECEMBER 31, 2005

COMPARATIVE BALANCE SHEET

ACCOUNT NAME	Reference Page	Current Year	Previous Year
Assets:			
Utility Plant in Service (101-105) _____	F-5,W-1,S-1	\$ <u>814,140</u>	\$ <u>282,161</u>
Accumulated Depreciation and Amortization (108) _____	F-5,W-2,S-2	<u>243,903</u>	<u>241,535</u>
Net Utility Plant _____		\$ <u>570,237</u>	\$ <u>40,626</u>
Cash _____		<u>47,217</u>	<u>8,672</u>
Customer Accounts Receivable (141) _____		<u>8,783</u>	<u>2,891</u>
Other Assets (Specify): _____			
Supplies _____		<u>1,100</u>	<u>1,100</u>
Unamortized Transfer & Rate Costs _____		<u>33,981</u>	<u>21,966</u>
Deferred Legal Costs _____		<u>150</u>	<u>150</u>
Due from Parent Corporation _____		<u>378,400</u>	<u>-</u>
Total Assets _____		\$ <u>1,039,868</u>	\$ <u>75,405</u>
Liabilities and Capital:			
Common Stock Issued (201) _____	F-6	<u>500</u>	<u>500</u>
Preferred Stock Issued (204) _____	F-6		
Other Paid in Capital (211) _____		<u>346,863</u>	<u>134,863</u>
Retained Earnings (215) _____	F-6	<u>(10,635)</u>	<u>(268,596)</u>
Proprietary Capital (Proprietary and partnership only) (218) _____	F-6		
Total Capital _____		\$ <u>336,728</u>	\$ <u>(133,233)</u>
Long Term Debt (224) _____	F-6	\$ <u>421,803</u>	\$ <u>113,896</u>
Accounts Payable (231) _____			
Notes Payable (232) _____			
Customer Deposits (235) _____		<u>4,908</u>	<u>6,492</u>
Accrued Taxes (236) _____		<u>8,913</u>	<u>3,174</u>
Other Liabilities (Specify) _____			
Stockholder Loans _____		<u>90,733</u>	<u>73,596</u>
Advances for Construction _____			
Contributions in Aid of Construction - Net (271-272) _____	F-8	<u>176,783</u>	<u>11,480</u>
Total Liabilities and Capital _____		\$ <u>1,039,868</u>	\$ <u>75,405</u>

UTILITY NAME HOLIDAY UTILITY COMPANY, INC.

YEAR OF REPORT DECEMBER 31, 2005

GROSS UTILITY PLANT

Plant Accounts: (101 - 107) inclusive	Water	Wastewater	Plant other Than Reporting Systems	Total
Utility Plant in Service (101)	\$ <u>814,140</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>814,140</u>
Construction Work in Progress (105) _____	_____	_____	_____	_____
Other (Specify) _____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Total Utility Plant _____	\$ <u>814,140</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>814,140</u>

ACCUMULATED DEPRECIATION (A/D) AND AMORTIZATION OF UTILITY PLANT

Account 108	Water	Wastewater	Other Than Reporting Systems	Total
Balance First of Year _____	\$ <u>241,535</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>241,535</u>
<u>Add Credits During Year:</u>				
Accruals charged to depreciation account _____	\$ <u>20,474</u>	\$ _____	\$ _____	\$ <u>20,474</u>
Salvage _____	_____	_____	_____	_____
Other Credits (specify) _____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Total Credits _____	\$ <u>20,474</u>	\$ _____	\$ _____	\$ <u>20,474</u>
<u>Deduct Debits During Year:</u>				
Book cost of plant retired _____	\$ _____	\$ _____	\$ _____	\$ _____
Cost of removal _____	_____	_____	_____	_____
Other debits (specify)				
PSC-05-0621-PAA-WU	<u>18,106</u>	_____	_____	<u>18,106</u>
Total Debits _____	\$ <u>18,106</u>	\$ _____	\$ _____	\$ <u>18,106</u>
Balance End of Year _____	\$ <u>243,903</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>243,903</u>

UTILITY NAME: HOLIDAY UTILITY COMPANY, INC.

YEAR OF REPORT DECEMBER 31, 2005

CAPITAL STOCK (201 - 204)

	Common Stock	Preferred Stock
Par or stated value per share_____	5	N/A
Shares authorized_____	100	_____
Shares issued and outstanding_____	100	_____
Total par value of stock issued_____	500	_____
Dividends declared per share for year_____	0	_____

RETAINED EARNINGS (215)

	Appropriated	Un-Appropriated
Balance first of year_____	\$ N/A	\$ (268,596)
Changes during the year (Specify):		
Net Income for the Year_____	_____	257,961
_____	_____	_____
_____	_____	_____
Balance end of year_____	\$ N/A	\$ (10,635)

PROPRIETARY CAPITAL (218)

	Proprietor Or Partner	Partner
Balance first of year_____	\$ N/A	\$ N/A
Changes during the year (Specify):		
_____	_____	_____
_____	_____	_____
_____	_____	_____
Balance end of year_____	\$ N/A	\$ N/A

LONG TERM DEBT (224)

Description of Obligation (Including Date of Issue and Date of Maturity):	Interest		Principal per Balance Sheet Date
	Rate	# of Pymts	
_____	_____	_____	\$ _____
_____	_____	_____	_____
_____	_____	_____	_____
Total_____	N/A	_____	\$ N/A

UTILITY NAME: HOLIDAY UTILITY COMPANY, INC.

YEAR OF REPORT DECEMBER 31, 2005

TAX EXPENSE

(a)	Water (b)	Wastewater (c)	Other (d)	Total (e)
Income Taxes:				
Federal income tax _____	\$ _____	\$ _____	\$ 4,411	\$ 4,411
State income Tax _____	_____	_____	1,354	1,354
Taxes Other Than Income:				
State ad valorem tax _____	_____	_____	_____	_____
Local property tax _____	812	_____	_____	812
Regulatory assessment fee _____	3,148	_____	_____	3,148
Other (Specify) _____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Total Tax Expense _____	\$ 3,960	\$ N/A	\$ 5,765	\$ 9,725

PAYMENTS FOR SERVICES RENDERED BY OTHER THAN EMPLOYEES

Report all information concerning outside rate, management, construction, advertising, labor relations, public relations, or other similiar professional services rendered the respondent for which aggregate payments during the year to any corporation, partnership, individual, or organization of any kind whatever amounting to \$500 or more.

Name of Recipient	Water Amount	Wastewater Amount	Description of Service
U.S. WATER	\$ 38,546	\$ N/A	PROFESSIONAL SERVICES
U.S. WATER	\$ 400	\$ N/A	TESTING
U.S. WATER	\$ 17,025	\$ N/A	OTHER
GARY DEREMER	\$ 12,000	\$ N/A	MANAGEMENT FEES
NABORS / GIBLIN	\$ 72,879	\$ N/A	LITIGATION COSTS
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____

CONTRIBUTIONS IN AID OF CONSTRUCTION (271)

(a)	Water (b)	Wastewater (c)	Total (d)
1) Balance first of year _____	\$ <u>32,252</u>	\$ <u>N/A</u>	\$ <u>32,252</u>
2) Add credits during year _____			
_____	\$ <u>169,952</u>	\$ _____	\$ <u>169,952</u>
3) Total _____	<u>202,204</u>		<u>202,204</u>
4) Deduct charges during the year _____			
5) Balance end of year _____	<u>202,204</u>		<u>202,204</u>
6) Less Accumulated Amortization _____	<u>25,421</u>		<u>25,421</u>
7) Net CIAC _____	\$ <u>176,783</u>	\$ <u>N/A</u>	\$ <u>176,783</u>

ADDITIONS TO CONTRIBUTIONS IN AID OF CONSTRUCTION DURING YEAR (CREDITS)

Report below all developers or contractors agreements from which cash or property was received during the year.	Indicate "Cash" or "Property"	Water	Wastewater
<u>Psc Staff Adjustment - PSC-05-0621-PAA-WU</u>	<u>PSC</u>	<u>100</u>	
<u>Gulfwinds Development</u>	<u>Cash</u>	<u>169,852</u>	

Sub-total _____		\$ <u>169,952</u>	\$ <u>N/A</u>
Report below all capacity charges, main extension charges and customer connection charges received during the year.			
Description of Charge	Number of Connections	Charge per Connection	
_____	_____	\$ _____	\$ _____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Total Credits During Year (Must agree with line # 2 above.) _____			\$ <u>169,952</u>
			\$ <u>N/A</u>

ACCUMULATED AMORTIZATION OF CIAC (272)

	Water	Wastewater	Total
Balance First of Year _____	\$ <u>20,772</u>	\$ <u>N/A</u>	\$ <u>20,772</u>
Add Debits During Year: _____	<u>4,691</u>		<u>4,691</u>
Deduct Credits During Year: __ PSC-05-0621-PAA-WU _____	<u>(42)</u>		<u>(42)</u>
Balance End of Year (Must agree with line #6 above.)	\$ <u>25,421</u>	\$ <u>N/A</u>	\$ <u>25,421</u>

N/A

**** COMPLETION OF SCHEDULE REQUIRED ONLY IF AFUDC WAS CHARGED DURING YEAR ****

UTILITY NAME HOLIDAY UTILITY COMPANY, INC.

YEAR OF REPORT
DECEMBER 31, 2005

SCHEDULE "A"

SCHEDULE OF COST OF CAPITAL USED FOR AFUDC CALCULATION (1)

Class of Capital (a)	Dollar Amount (b)	Percentage of Capital (c)	Actual Cost Rates (d)	Weighted Cost [c x d] (e)
Common Equity	\$ <u>N/A</u>	<u> </u> %	<u> </u> %	<u>N/A</u> %
Preferred Stock	<u> </u>	<u> </u> %	<u> </u> %	<u> </u> %
Long Term Debt	<u> </u>	<u> </u> %	<u> </u> %	<u> </u> %
Customer Deposits	<u> </u>	<u> </u> %	<u> </u> %	<u> </u> %
Tax Credits - Zero Cost	<u> </u>	<u> </u> %	0.00 %	<u> </u> %
Tax Credits - Weighted Cost	<u> </u>	<u> </u> %	<u> </u> %	<u> </u> %
Deferred Income Taxes	<u> </u>	<u> </u> %	<u> </u> %	<u> </u> %
Other (Explain)	<u> </u>	<u> </u> %	<u> </u> %	<u> </u> %
Total	\$ <u><u>N/A</u></u>	<u><u>100.00</u></u> %		<u><u>N/A</u></u> %

(1) Must be calculated using the same methodology used to calculate AFUDC rate approved by the Commission.

APPROVED AFUDC RATE

Current Commission approved AFUDC rate:	<u> </u> %
Commission Order Number approving AFUDC rate:	<u> </u>

**WATER
OPERATING
SECTION**

UTILITY NAME: HOLIDAY UTILITY COMPANY, INC.

YEAR OF REPORT DECEMBER 31, 2005

WATER UTILITY PLANT ACCOUNTS

Acct. No. (a)	Account Name (b)	Previous Year (c)	Additions (d)	Retirements (e)*	Current Year (f)
301	Organization_____	\$ _____	\$ _____	\$ _____	\$ _____
302	Franchises_____	_____	_____	_____	_____
303	Land and Land Rights_____	_____	_____	_____	_____
304	Structures and Improvements_____	14,795	49,632	_____	64,427
305	Collecting and Impounding Reservoirs_____	_____	_____	_____	_____
306	Lake, River and Other Intakes_____	_____	_____	_____	_____
307	Wells and Springs_____	10,158	24,668	_____	34,826
308	Infiltration Galleries and Tunnels_____	_____	_____	_____	_____
309	Supply Mains_____	1,475	250,052	_____	251,527
310	Power Generation Equipment_____	_____	_____	_____	_____
311	Pumping Equipment_____	65,209	74,855	2,357	137,707
320	Water Treatment Equipment_____	25,109	28,706	_____	53,815
330	Distribution Reservoirs and Standpipes_____	_____	_____	_____	_____
331	Transmission and Distribution Lines_____	136,421	87,067	13,523	209,965
333	Services_____	2,410	27,444	_____	29,854
334	Meters and Meter Installations_____	21,416	7,016	1,965	26,467
335	Hydrants_____	_____	_____	_____	-
336	Backflow Prevention Devices_____	_____	384	_____	384
339	Other Plant and Miscellaneous Equipment_____	_____	_____	_____	-
340	Office Furniture and Equipment_____	_____	_____	_____	_____
341	Transportation Equipment_____	_____	_____	_____	_____
342	Stores Equipment_____	_____	_____	_____	_____
343	Tools, Shop and Garage Equipment_____	_____	_____	_____	_____
344	Laboratory Equipment_____	_____	_____	_____	_____
345	Power Operated Equipment_____	_____	_____	_____	_____
346	Communication Equipment_____	_____	_____	_____	_____
347	Miscellaneous Equipment_____	5,168	_____	_____	5,168
348	Other Tangible Plant_____	_____	_____	_____	-
	Total Water Plant_____	\$ 282,161	549,824	17,845	814,140

* To reflect adjustments to Plant per PSC-05-0621-PAA-WU issued 6/06/05.

UTILITY NAME: HOLIDAY UTILITY COMPANY, INC.

YEAR OF REPORT
DECEMBER 31, 2005

ANALYSIS OF ACCUMULATED DEPRECIATION BY PRIMARY ACCOUNT - WATER

Acct. No. (a)	Account (b)	Average Service Life in Years (c)	Average Salvage in Percent (d)	Depr. Rate Applied (e)	Accumulated Depreciation Balance Previous Year (f)	Debits (g)*	Credits (h)	Accum. Depr. Balance End of Year (f-g+h=i) (i)
304	Structures and Improvements_	35	%	2.86 %	\$ 8,437	\$	\$ 1,302	\$ 9,739
305	Collecting and Impounding Reservoirs_		%					
306	Lake, River and Other Intakes_		%					
307	Wells and Springs_	28	%	3.57 %	5,748		803	6,551
308	Infiltration Galleries & Tunnels_		%					
309	Supply Mains_	32	%	3.13 %	69		3,960	4,029
310	Power Generating Equipment_		%					
311	Pumping Equipment_	17	%	5.88 %	64,271	2,357	5,896	67,810
320	Water Treatment Equipment_	17	%	5.88 %	22,872		2,320	25,192
330	Distribution Reservoirs & Standpipes_		%					
331	Trans. & Dist. Mains_	38	%	2.63 %	119,163	13,784	4,377	109,756
333	Services_	35	%	2.86 %	2,205		461	2,666
334	Meter & Meter Installations_	17	%	5.88 %	13,602	1,965	1,350	12,987
335	Hydrants_		%					
336	Backflow Prevention Devices_		%				5	5
339	Other Plant and Miscellaneous Equipment_		%					
340	Office Furniture and Equipment_		%					
341	Transportation Equipment_		%					
342	Stores Equipment_		%					
343	Tools, Shop and Garage Equipment_		%					
344	Laboratory Equipment_		%					
345	Power Operated Equipment_		%					
346	Communication Equipment_		%					
347	Miscellaneous Equipment_	10	%	10.00 %	5,168			5,168
348	Other Tangible Plant_		%					
	Totals_				\$ 241,535	18,106	20,474	243,903 *

* This amount should tie to Sheet F-5.

* To reflect adjustments to Plant per PSC-05-0621-PAA-WU issued 6/06/05.

UTILITY NAME: HOLIDAY UTILITY COMPANY, INC.

YEAR OF REPORT DECEMBER 31, 2005

WATER OPERATION AND MAINTENANCE EXPENSE

Acct. No.	Account Name	Amount
601	Salaries and Wages - Employees_____	\$ _____
603	Salaries and Wages - Officers, Directors, and Majority Stockholders_____	12,000
604	Employee Pensions and Benefits_____	_____
610	Purchased Water_____	2,325
615	Purchased Power_____	5,007
616	Fuel for Power Production_____	_____
618	Chemicals_____	810
620	Materials and Supplies_____	1,594
630	Contractual Services:	
	Billing_____	_____
	Professional_____	42,818
	Testing_____	400
	Other_____	17,025
640	Rents_____	1,667
650	Transportation Expense_____	_____
655	Insurance Expense_____	885
665	Regulatory Commission Expenses (Amortized Rate Case Expense)_____	12,080
670	Bad Debt Expense_____	_____
675	Miscellaneous Expenses_____	1,078
	Total Water Operation And Maintenance Expense_____	\$ <u>97,689</u> *

* This amount should tie to Sheet F-3.

WATER CUSTOMERS

Description (a)	Type of Meter ** (b)	Equivalent Factor (c)	Number of Active Customers		Total Number of Meter Equivalents (c x e) (f)
			Start of Year (d)	End of Year (e)	
Residential Service					
5/8"	D	1.0	319	317	317
3/4"	D	1.5	0	0	0
1"	D	2.5	13	14	35
1 1/2"	D,T	5.0	5	5	25
General Service					
5/8"	D	1.0			
3/4"	D	1.5			
1"	D	2.5			
1 1/2"	D,T	5.0			
2"	D,C,T	8.0	1	1	8
3"	D	15.0	0	1	15
3"	C	16.0			
3"	T	17.5			
Unmetered Customers					
Other (Specify)					
** D = Displacement C = Compound T = Turbine			Total	338	338
				338	400

UTILITY NAME: HOLIDAY UTILITY COMPANY, INC.

YEAR OF REPORT DECEMBER 31, 2005

SYSTEM NAME: _____

PUMPING AND PURCHASED WATER STATISTICS

(a)	(b)	(c)	(d)	(e)	(f)
	Water Purchased For Resale (Omit 000's)	Finished Water From Wells (Omit 000's)	Recorded Accounted For Loss Through Line Flushing Etc. (Omit 000's)	Total Water Pumped And Purchased (Omit 000's) [(b)+(c)-(d)]	Water Sold To Customers (Omit 000's)
January_-----	0	2,866	29	2,837	2,304
February_-----	0	2,637	26	2,611	1,976
March_-----	0	2,546	25	2,521	2,031
April_-----	0	3,142	31	3,111	2,687
May_-----	0	2,959	30	2,929	2,273
June_-----	0	2,578	26	2,552	2,899
July_-----	0	2,706	27	2,679	2,200
August_-----	0	2,757	28	2,729	2,119
September_-----	1	2,750	27	2,724	2,541
October_-----	41	3,259	33	3,267	2,489
November_-----	245	2,743	27	2,961	2,528
December_-----	1	2,625	26	2,600	2,211
Total for Year_-----	288	33,568	335	33,521	28,258

If water is purchased for resale, indicate the following:
 Vendor _____ CITY OF TARPON SPRINGS
 Point of delivery INTERCONNECTION IN ANCLOTE

If water is sold to other water utilities for redistribution, list names of such utilities below:

MAINS (FEET)

Kind of Pipe (PVC, Cast Iron, Coated Steel, etc.)	Diameter of Pipe	First of Year	Added	Removed or Abandoned	End of Year
UNKNOWN	_____	_____	_____	_____	-
_____	_____	_____	_____	_____	-
_____	_____	_____	_____	_____	-
COMPLETE ENGINEERING SURVEY & STUDY IN PROGRESS					
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

UTILITY NAME: HOLIDAY UTILITY COMPANY, INC.

YEAR OF REPORT DECEMBER 31, 2005

SYSTEM NAME: _____

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)
	#1	#2	#3	#4
Year Constructed _____	_____	_____	_____	_____
Types of Well Construction and Casing _____	STEEL	STEEL	STEEL	STEEL
_____	_____	_____	_____	_____
Depth of Wells _____	65'	100'	45'	39'
Diameters of Wells _____	8"	6"	6"	6"
Pump - GPM _____	210	40	45	50
Motor - HP _____	15	5	5	5
Motor Type * _____	PEERLESS	PEERLESS	PEERLESS	PEERLESS
Yields of Wells in GPD _____	65,000	29,000	14,000	11,000
Auxiliary Power _____	_____	_____	_____	_____
* Submersible, centrifugal, etc.	WESTWOOD	ANCLOTE	ANCLOTE	ANCLOTE

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	STEEL	STEEL	_____	_____
Capacity of Tank _____	15000 GAL	3000 GAL	_____	_____
Ground or Elevated _____	GROUND	GROUND	_____	_____

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
Motors				
Manufacturer _____	_____	_____	_____	_____
Type _____	_____	_____	_____	_____
Rated Horsepower _____	_____	_____	_____	_____
Pumps				
Manufacturer _____	PEERLESS	_____	_____	_____
Type _____	PEERLESS	_____	_____	_____
Capacity in GPM _____	240	_____	_____	_____
Average Number of Hours Operated Per Day _____	24	_____	_____	_____
Auxiliary Power _____	NONE	_____	_____	_____

UTILITY NAME: HOLIDAY UTILITY COMPANY, INC.

YEAR OF REPORT DECEMBER 31, 2005

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day_ _ _	_____	_____	_____
Type of Source_ _ _ _ _	<u>GROUND</u>	<u>GROUND/PURCHASED</u>	_____

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type_ _ _ _ _	<u>CHLORINE</u>	<u>CHLORAMINE</u>	_____
Make_ _ _ _ _	_____	_____	_____
Permitted Capacity (GPD)_ _	_____	_____	_____
High service pumping	_____	_____	_____
Gallons per minute_ _ _ _	_____	_____	_____
Reverse Osmosis_ _ _ _ _	_____	_____	_____
Lime Treatment	_____	_____	_____
Unit Rating_ _ _ _ _	_____	_____	_____
Filtration	_____	_____	_____
Pressure Sq. Ft._ _ _ _ _	_____	_____	_____
Gravity GPD/Sq.Ft._ _ _ _	_____	_____	_____
Disinfection	_____	_____	_____
Chlorinator_ _ _ _ _	_____	_____	_____
Ozone_ _ _ _ _	_____	_____	_____
Other_ _ _ _ _	_____	_____	_____
Auxiliary Power_ _ _ _ _	_____	_____	_____
	<u>WESTWOOD</u>	<u>ANCLOTE</u>	_____

UTILITY NAME: HOLIDAY UTILITY COMPANY, INC.

YEAR OF REPORT
DECEMBER 31, 2005

SYSTEM NAME: _____

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 221

2. Maximum number of ERCs * which can be served. 700

3. Present system connection capacity (in ERCs *) using existing lines. 400 (ESTIMATED)

4. Future connection capacity (in ERCs *) upon service area buildout. 300 (ESTIMATED)

5. Estimated annual increase in ERCs *. 5

6. Is the utility required to have fire flow capacity? _____
If so, how much capacity is required? _____

7. Attach a description of the fire fighting facilities. 4 HYDRANTS

8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
COMPLETE SURVEY AND STUDY OF SYSTEM IN PROGRESS.

9. When did the company last file a capacity analysis report with the DEP? _____

10. If the present system does not meet the requirements of DEP rules, submit the following:

- a. Attach a description of the plant upgrade necessary to meet the DEP rules.
- b. Have these plans been approved by DEP? _____
- c. When will construction begin? _____
- d. Attach plans for funding the required upgrading.
- e. Is this system under any Consent Order with DEP? _____

11. Department of Environmental Protection ID # PWS - 651 - 1953 651-2177

12. Water Management District Consumptive Use Permit # 20-00231903

- a. Is the system in compliance with the requirements of the CUP? _____
- b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the preceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of SFR customers for the same period and divide the result by 365 days.
(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000)/365 days/350 gallons per day).

WASTEWATER OPERATING SECTION

N/A
WATER UTILITY ONLY

UTILITY NAME: HOLIDAY UTILITY COMPANY, INC.

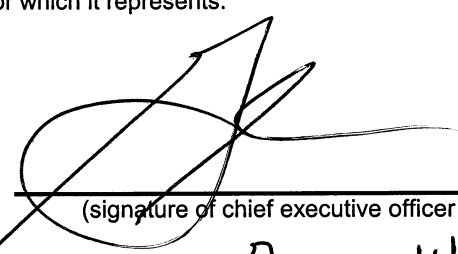
YEAR OF REPORT
DECEMBER 31, 2004

CERTIFICATION OF ANNUAL REPORT

I HEREBY CERTIFY, to the best of my knowledge and belief:

- | | | | |
|--|--------------------------------|----|--|
| YES
<input checked="" type="checkbox"/> | NO
<input type="checkbox"/> | 1. | The utility is in substantial compliance with the Uniform System of Accounts prescribed by the Florida Public Service Commission in Rule 25-30.115 (1), Florida Administrative Code. |
| YES
<input checked="" type="checkbox"/> | NO
<input type="checkbox"/> | 2. | The utility is in substantial compliance with all applicable rules and orders of the Florida Public Service Commission. |
| YES
<input checked="" type="checkbox"/> | NO
<input type="checkbox"/> | 3. | There have been no communications from regulatory agencies concerning noncompliance with, or deficiencies in, financial reporting practices that could have a material effect on the financial statement of the utility. |
| YES
<input checked="" type="checkbox"/> | NO
<input type="checkbox"/> | 4. | The annual report fairly represents the financial condition and results of operations of the respondent for the period presented and other information and statements presented in the report as to the business affairs of the respondent are true, correct, and complete for the period for which it represents. |

Items Certified

1. <input checked="" type="checkbox"/>	2. <input checked="" type="checkbox"/>	3. <input checked="" type="checkbox"/>	4. <input checked="" type="checkbox"/>	 _____ (signature of chief executive officer of the utility) *
---	---	---	---	--

Date: 4/27/06

1. <input checked="" type="checkbox"/>	2. <input checked="" type="checkbox"/>	3. <input checked="" type="checkbox"/>	4. <input checked="" type="checkbox"/>	 _____ (signature of chief financial officer of the utility) *
---	---	---	---	--

Date: 4/27/06

* Each of the four items must be certified YES or NO. Each item need not be certified by both officers. The items being certified by the officer should be indicated in the appropriate area to the left of the signature.

Notice: Section 837.06, Florida Statutes, provides that any person who knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his duty shall be guilty of a misdemeanor of the second degree.