FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

960275-TC

1. LEGAL NAME OF THE APPLICANT

GULF TELE COMMUNICATIONS INCORPORATED

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS

GULF TELE COMMUNICATIONS INCORPORATED

3. ADDRESS OF THE APPLICANT(S)

STREET PO BOX 19055

CITY SARASOTA

STATE & ZIP FLORIDA 34276

4. TYPE OF ORGANIZATION (CHECK ONE)

A. INDIVIDUAL DOING BUSINESS UNDER HIS/HER: OWN NAME. [ ]

DOCUMENTATION: No other documentation needed.

B. PARTNERSHIP: [ ]

DOCUMENTATION: Attach a copy of the partnership agreement, and a list with the name and address of all partners.

C. CORPORATION: [✓]

DOCUMENTATION: Attach proof that articles of incorporation have been filed with the Florida Secretary of State's Office. If incorporated outside of Florida, attach proof from the Florida Secretary of State that applicant has authority to operate in Florida and provide name and address of Florida Registered Agent.

ACK
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2675

SUNCOAST POOL SERVICE, INC.
Phone 813-922-2213
5670 Pinkney Ave.
Sarasota, Fl 34233-2426

FEB. 29 1996

PAY TO THE ORDER OF PUBLIC SERVICE COMMISSION $100.00

ONE HUNDRED AND 00/100 DOLLARS

TOTAL OF INVOICES
LESS ___ % DISCOUNT
LESS
TOTAL DEDUCTIONS
AMOUNT OF CHECK

Sun Bank

FOR

DOCUMENT NO. 02264-96
3/5/96