

1. This is an application for (check one):

960696-TI

- Original Authority (New company).
- Approval of Transfer (To another certificated company).
- Approval of Assignment of existing certificate (To a noncertificated company).
- Approval for transfer of control (To another certificated company).

2. Select what type of business your company will be conducting (check all that apply):

- Facilities based carrier - company owns and operates or plans to own and operate telecommunications switches and transmission facilities in Florida.
- Operator Service Provider - company provides or plans to provide alternative operator services for IXCs; or toll operator services to call aggregator locations; or clearinghouse services to bill such calls.
- Reseller - company has or plans to have one or more switches but primarily leases the transmission facilities of other carriers. Bills its own customer base for services used.
- Switchless rebiller - company has no switch or transmission facilities but may have a billing computer. Aggregates traffic to obtain bulk discounts from underlying carrier. Rebills end users at a rate above its discount but generally below the rate end users would pay for unaggregated traffic.
- Multi-Location Discount Aggregator - company contracts with unaffiliated entities to obtain bulk/volume discounts under multi-location discount plans from certain underlying carriers. Then offers the resold service by enrolling unaffiliated customers.

FORM PSC/CMU 31 (11/91)

-2-

DOCUMENT NUMBER-DATE

06067 JUN-3 1996

FPSC-RECORDS/REPORTING

Check received with filing and forwarded to Fiscal for deposit. Fiscal to forward a copy of check plus RAR with proof of deposit. Initials of person who forwarded check: A.J.

U372

JUN 3 '96

3. Name of corporation, partnership, cooperative, joint venture or sole proprietorship:
J.F.G. ASSOCIATES, INC.
4. Name under which the applicant will do business (fictitious name, etc.):
THE CENTERS OF WESTSHORE
5. National address (including street name & number, post office box, city, state and zip code).
550 N. REO ST. SUITE 300
TAMPA, FL. 33609-1065
6. Florida address (including street name & number, post office box, city, state and zip code):
550 N. REO ST. SUITE 300
TAMPA, FL. 33609-1065
7. Structure of organization;
- | | | | |
|--------------------------|---------------------|-------------------------------------|---------------------|
| <input type="checkbox"/> | Individual | <input checked="" type="checkbox"/> | Corporation |
| <input type="checkbox"/> | Foreign Corporation | <input type="checkbox"/> | Foreign Partnership |
| <input type="checkbox"/> | General Partnership | <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Other, _____ | | |
8. If applicant is an individual or partnership, please give name, title and address of sole proprietor or partners. N/A BUSINESS IS A CORPORATION.
- (a) Provide proof of compliance with the foreign limited partnership statute (Chapter 620.169 FS), if applicable.
- (b) Indicate if the individual or any of the partners have previously been:
- (1) adjudged bankrupt, mentally incompetent, or found guilty of any felony or of any crime, or whether such actions may result from pending proceedings.
- (2) officer, director, partner or stockholder in any other Florida certificated telephone company. If yes, give name of company and relationship. If no longer associated with company, give reason why not.

9. If incorporated, please give:

- (a) Proof from the Florida Secretary of State that the applicant has authority to operate in Florida.

Corporate charter number: 59-2555896

- (b) Name and address of the company's Florida registered agent. JAY HARPLEY
1602 W. SLIGH AVE. SUITE 100 TAMPA, FL. 33604

- (c) Provide proof of compliance with the fictitious name statute (Chapter 865.09 FS), if applicable.

Fictitious name registration number: H50753

- (c) Indicate if any of the officers, directors, or any of the ten largest stockholders have previously been:

- (1) adjudged bankrupt, mentally incompetent, or found guilty of any felony or of any crime, or whether such actions may result from pending proceedings.

NO

- (2) officer, director, partner or stockholder in any other Florida certificated telephone company. If yes, give name of company and relationship. If no longer associated with company, give reason why not.

NO

10. Who will serve as liaison with the Commission in regard to (please give name, title, address and telephone number):

- (a) The application; SUE DENNIS, COMMUNICATIONS MGR. (813)289-6541
550 N. REO ST. SUITE 300 TAMPA, FL. 33609-1065

- (b) Official Point of Contact for the ongoing operations of the company; SUE DENNIS, COMMUNICATIONS MGR.
550 N. REO ST. SUITE 300 TAMPA, FL. 33609-1065
(813) 289-6541.

- (c) Tariff; SUE DENNIS, COMMUNICATIONS MGR. (813) 289-6541
550 N. REO ST. SUITE 300 TAMPA, FL. 33609-1065

- (d) Complaints/Inquiries from customers;
SUE DENNIS, COMMUNICATIONS MGR. (813) 289-6541
550 N. REO ST. SUITE 300 TAMPA, FL. 33609-1065

11. List the states in which the applicant:

- (a) Has operated as an interexchange carrier.
NONE

- (b) Has applications pending to be certificated
as an interexchange carrier.
NONE

- (c) Is certificated to operate as an
interexchange carrier.
NONE

- (d) Has been denied authority to operate as an
interexchange carrier and the circumstances
involved.
NONE

- (e) Has had regulatory penalties imposed for
violations of telecommunications statutes and
the circumstances involved.
NONE

- (f) Has been involved in civil court proceedings
with an interexchange carrier, local exchange
company or other telecommunications entity,
and the circumstances involved.
NONE

12. What services will the applicant offer to other
certificated telephone companies:

- (x) Facilities. () Operators.
() Billing and Collection. () Sales.
() Maintenance.
() Other: _____

13. Do you have a marketing program?

SERVICES WILL BE OFFERED TO ALL NEW TENANTS OF THE
EXECUTIVE SUITES.

14. Will your marketing program:

- () Pay commissions? NO
() Offer sales franchises? NO
() Offer multi-level sales incentives? NO
() Offer other sales incentives? NO

15. Explain any of the offers checked in question 14 (To whom, what amount, type of franchise, etc.).
NONE WERE CHECKED

16. Who will receive the bills for your service (Check all that apply)?

- Residential customers. Business customers.
 PATS providers. PATS station end-users.
 Hotels & motels. Hotel & motel guests.
 Universities. Univ. dormitory residents.
 Other: (specify) _____.

17. Please provide the following (if applicable):

(a) Will the name of your company appear on the bill for your services, and if not who will the billed party contact to ask questions about the bill (provide name and phone number) and how is this information provided?
THE COMPANY NAME AND PHONE NUMBER WILL BE PROVIDED ON THE INVOICE.

(b) Name and address of the firm who will bill for your service.
THE CENTERS OF WESTSHORE 550 W. REO ST. SUITE 300
TAMPA, FL. 33609-1065

18. Please provide all available documentation demonstrating that the applicant has the following capabilities to provide interexchange telecommunications service in Florida.

A. Financial capability BALANCE SHEET (ATTACHED)

B. Managerial capability LIST (ATTACHED)

C. Technical capability WILL BE PROVIDED BY
LONG DISTANCE CARRIER

18. Please submit the proposed tariff under which the company plans to begin operation. Use the format required by Commission Rule 25-24.485 (example enclosed). TARIFF ATTACHED

19. The applicant will provide the following interexchange carrier services (Check all that apply):

MTS with distance sensitive per minute rates
 Method of access is FGA
 Method of access is FGB
 Method of access is FGD
 Method of access is 800

MTS with route specific rates per minute
 Method of access is FGA
 Method of access is FGB
 Method of access is FGD
 Method of access is 800

MTS with statewide flat rates per minute (i.e. not distance sensitive)

Method of access is FGA
 Method of access is FGB
 Method of access is FGD
 Method of access is 800

MTS for pay telephone service providers

Block-of-time calling plan (Reach out Florida, Ring America, etc.).

800 Service (Toll free)

WATS type service (Bulk or volume discount)
 Method of access is via dedicated facilities
 Method of access is via switched facilities

Private Line services (Channel Services)
(For ex. 1.544 mbs., DS-3, etc.)

Travel Service
 Method of access is 950
 Method of access is 800

900 service

SERVICES WILL BE PROVIDED BY THE LONG DISTANCE CARRIER.

- ___ Operator Services
- ___ Available to presubscribed customers
- ___ Available to non presubscribed customers (for example to patrons of hotels, students in universities, patients in hospitals.
- ___ Available to inmates

Services included are:

- ___ Station assistance
- ___ Person to Person assistance
- ___ Directory assistance
- ___ Operator verify and interrupt
- ___ Conference Calling

20. What does the end user dial for each of the interexchange carrier services that were checked in services included (above).

21. ___ Other:

ATTACHMENTS:

- A - CERTIFICATE TRANSFER STATEMENT
- B - CUSTOMER DEPOSITS AND ADVANCE PAYMENTS
- C - INTRASTATE NETWORK
APPLICANT ACKNOWLEDGEMENT STATEMENT
- D - FLORIDA TELEPHONE EXCHANGES and EAS ROUTES
- E - GLOSSARY

**** APPENDIX A ****

CERTIFICATE TRANSFER STATEMENT

N/A

I, (TYPE NAME) _____,
(TITLE) _____, of (NAME OF COMPANY)
_____, and current
holder of certificate number _____, have reviewed
this application and join in the petitioner's request for a
transfer of the above-mention certificate.

UTILITY OFFICAL:

Signature

Date

Title

Telephone No.

**** APPENDIX B ****

CUSTOMER DEPOSITS AND ADVANCE PAYMENTS

A statement of how the Commission can be assured of the security of the customer's deposits and advance payments may be responded to in one of the following ways (applicant please check one):

- (x) The applicant will not collect deposits nor will it collect payments for service more than one month in advance.
- () The applicant will file with the Commission and maintain a surety bond in an amount equal to the current balance of deposits and advance payments in excess of one month. (Bond must accompany application.)

UTILITY OFFICIAL:

John F. Yancy
Signature

5/30/96
Date

Pres/Owner
Title

813-289-6541
Telephone No.

**** APPENDIX C ****

INTRASTATE NETWORK

1. **POP:** Addresses where located, and indicate if owned or leased.

1) 2)

WILL BE PROVIDED BY THE LONG DISTANCE CARRIER.

3) 4)

2. **SWITCHES:** Address where located, by type of switch, and indicate if owned or leased.

1) 2)

WILL BE PROVIDED BY THE LONG DISTANCE CARRIER.

3) 4)

3. **TRANSMISSION FACILITIES:** Pop-to-Pop facilities by type of facilities (microwave, fiber, copper, satellite, etc.) and indicate if owned or leased.

1) POP-to-POP TYPE OWNERSHIP

WILL BE PROVIDED BY THE LONG DISTANCE CARRIER.

2)

4. **ORIGINATING SERVICE:** Please provide the list of exchanges where you are proposing to provide originating service within thirty (30) days after the effective date of the certificate (Appendix D).

WILL BE PROVIDED BY THE LONG DISTANCE CARRIER.

5. **TRAFFIC RESTRICTIONS:** Please explain how the applicant will comply with the EAEA requirements contained in Commission Rule 25-24.471 (4) (a) (copy enclosed).

WILL BE PROVIDED BY THE LONG DISTANCE CARRIER.

6. **CURRENT FLORIDA INTRASTATE SERVICES:** Applicant has () or has not (x) previously provided intrastate telecommunications in Florida. If the answer is has, fully describe the following:

- a) What services have been provided and when did these services begin?
- b) If the services are not currently offered, when were they discontinued?

UTILITY OFFICIAL:

John P. Gunning
Signature

5/30/96
Date

Pres. Power
Title

813-289-6541
Telephone No.

**** APPLICANT ACKNOWLEDGEMENT STATEMENT ****

1. **REGULATORY ASSESSMENT FEE:** I understand that all telephone companies must pay a regulatory assessment fee in the amount of .15 of one percent of its gross operating revenue derived from intrastate business. Regardless of the gross operating revenue of a company, a minimum annual assessment fee of \$50 is required.
2. **GROSS RECEIPTS TAX:** I understand that all telephone companies must pay a gross receipts tax of two and one-half percent on all intra and interstate business.
3. **SALES TAX:** I understand that a seven percent sales tax must be paid on intra and interstate revenues.
4. **APPLICATION FEE:** A non-refundable application fee of \$250.00 must be submitted with the application.
5. **RECEIPT AND UNDERSTANDING OF RULES:** I acknowledge receipt and understanding of the Florida Public Service Commission's Rules and Orders relating to my provision of interexchange telephone service in Florida. I also understand that it is my responsibility to comply with all current and future Commission requirements regarding AAV service.
6. **ACCURACY OF APPLICATION:** By my signature below, I the undersigned owner or officer of the named utility in the application, attest to the accuracy of the information contained in this application and associated attachments. I have read the foregoing and declare that to the best of my knowledge and belief, the information is a true and correct statement. Further, I am aware that pursuant to Chapter 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.

UTILITY OFFICIAL:

John F. Gandy
Signature
Pres/owner
Title

5/30/96
Date

813-289-6541
Telephone No.

**** APPENDIX D ******FLORIDA TELEPHONE EXCHANGES****AND****EAS ROUTES**

Describe the service area in which you hold yourself out to provide service by telephone company exchange. If all services listed in your tariff are not offered at all locations, so indicate.

In an effort to assist you, attached is a list of major exchanges in Florida showing the small exchanges with which each has extended area service (EAS).

**** FLORIDA EAS FOR MAJOR EXCHANGES ****

<u>Extended Service Area</u>	<u>with</u>	<u>These Exchanges</u>
PENSACOLA:		Cantonment, Gulf Breeze Pace, Milton Holley-Navarre.
PANAMA CITY:		Lynn Haven, Panama City Beach, Youngstown-Fountain and Tyndall AFB.
TALLAHASSEE:		Crawfordville, Havana, Monticello, Panacea, Sopchoppy and St. Marks.
JACKSONVILLE:		Baldwin, Ft. George, Jacksonville Beach, Callahan, Maxville, Middleburg Orange Park, Ponte Vedra and Julington.
GAINESVILLE:		Alachua, Archer, Brooker, Hawthorne, High Springs, Melrose, Micanopy, Newberry and Waldo.
OCALA:		Belleview, Citra, Dunnellon, Forest Lady Lake (B21), McIntosh, Oklawaha, Orange Springs, Salt Springs and Silver Springs Shores.

**** FLORIDA EAS MAJOR EXCHANGES CONTINUE ****

DAYTONA BEACH:	New Smyrna Beach.
TAMPA:	CentralNone EastPlant City NorthZephyrhills SouthPalmetto WestClearwater
CLEARWATER:	St. Petersburg, Tampa-West and Tarpon Springs.
ST. PETERSBURG:	Clearwater.
LAKELAND:	Bartow, Mulberry, Plant City, Polk City and Winter Haven.
ORLANDO:	Apopka, East Orange, Lake Buena Vista, Oviedo, Windermere, Winter Garden, Winter Park, Montverde, Reedy Creek, and Oviedo-Winter Springs.
WINTER PARK:	Apopka, East Orange, Lake Buena Vista, Orlando, Oviedo, Sanford, Windermere, Winter Garden, Oviedo-Winter Springs Reedy Creek, Geneva and Montverde.
TITUSVILLE:	Cocoa and Cocoa Beach.
COCOA:	Cocoa Beach, Eau Gallie, Melbourne and Titusville.
MELBOURNE:	Cocoa, Cocoa Beach, Eau Gallie and Sebastian.
SARASOTA:	Bradenton, Myakka and Venice.
FT. MYERS:	Cape Coral, Ft. Myers Beach, North Cape Coral, North Ft. Myers, Pine Island, Lehigh Acres and Sanibel-Captiva Islands.

** FLORIDA EAS MAJOR EXCHANGES CONTINUE **

NAPLES:	Marco Island and North Naples.
WEST PALM BEACH:	Boynton Beach and Jupiter.
POMPANO BEACH:	Boca Raton, Coral Springs, Deerfield Beach and Ft. Lauderdale.
FT. LAUDERDALE:	Coral Springs, Deerfield Beach, Hollywood and Pompano Beach.
HOLLYWOOD:	Ft. Lauderdale and North Dade.
NORTH DADE:	Hollywood, Miami and Perrine.
MIAMI:	Homestead, North Dade and Perrine

WILL BE PROVIDED BY THE LONG DISTANCE CARRIER.

FLORIDA TELEPHONE EXCHANGES

PERSON COMPLETING FORM	SIGNATURE			DATE		
Alachua.....	Cherry Lake.....	Ft. Meade.....	Jacksonville.....	Melbourne.....	Panama City.....	Spring Lake.....
Alford.....	Chiefland.....	Ft. Myers.....	Jacksonville Bch..	Neirose.....	Panama City Beach..	Starks.....
Alligator Point...	Chipley.....	Ft. Myers Beach...	Jasper.....	Miami.....	Panama.....	Stuart.....
Altha.....	Citra.....	Ft. Pierce.....	Jay.....	Micanopy.....	Panacola.....	Superior Key....
Apalachicola.....	Clearwater.....	Ft. Walton Beach...	Jennings.....	Middleburg.....	Perrine.....	Sunny Hills.....
Apopka.....	Clearmont.....	Ft. White.....	Jensen Beach.....	Hilton.....	Perry.....	Tallahassee.....
Arcadie.....	Clearwater.....	Frostproof.....	Julington.....	Melino.....	Pierson.....	Tampa.....
Archer.....	Cocoa.....	Frostproof.....	Jupiter.....	Nanticallo.....	Pine Island.....	Tarpon Springs...
Astar.....	Cocoa Beach.....	Gainesville.....	Katon Beach.....	Nantverde.....	Plant City.....	Tavares.....
Avon Park.....	Coral Springs.....	Geneva.....	Zenonville.....	Moore Haven.....	Polk City.....	The Beaches.....
Baker.....	Cottandale.....	Glendale.....	Key Largo.....	Mount Dora.....	Panama Park.....	Titusville.....
Baldwin.....	Crawfordville.....	Gracoville.....	Key West.....	Mulberry.....	Panama Beach.....	Tranton.....
Bartow.....	Crecent City.....	Grand Ridge.....	Keystone Heights..	Murson.....	Pancho De Leon....	Trilacoochee.....
Belle Glade.....	Crystal River.....	Green Cove Spa....	Kingsley Lake.....	Nyaska.....	Pancho Vebra Beach..	Tyndall AFB.....
Belleview.....	Cross City.....	Greensboro.....	Kissimmee.....	Naples.....	Port Charlotte....	Umatilla.....
Beverly Hills.....	Crystal River.....	Greenwillie.....	La Belle.....	New Port Richey...	Port St Joe.....	Valparaiso.....
Big Pine.....	Dade City.....	Greenswood.....	Lady Lake.....	New Smyrna Beach..	Port St Lucie....	Venice.....
Blountstown.....	Daytona Beach.....	Gretna.....	Lake Buena Vista..	Newberry.....	Punta Gorda.....	Vernon.....
Boca Grande.....	DeBary.....	Greveland.....	Lake Butler.....	North Cape Coral..	Quincy.....	Vero Beach.....
Boca Raton.....	Bearfield Beach...	Gulf Breeze.....	Lake City.....	North Dade.....	Ralford.....	Waide.....
Bonifay.....	DeFuniak Springs..	Halma City.....	Lake Placid.....	North Fort Myers..	Reedy Creek.....	Walnut Hill.....
Bonita Springs....	Deland.....	Hastings.....	Lake Wales.....	North Key Largo...	Reynolds Hill....	Waukula.....
Bowling Green....	DeLeon Springs....	Savona.....	Lakeland.....	North Naples.....	St. Augustine.....	Weekiwanchoe Spa..
Boynton Beach....	Delray Beach.....	Sauthern.....	Laurel Hill.....	North Port.....	St. Cloud.....	Wekiva.....
Bradenton.....	Destin.....	High Springs.....	Lawley.....	Oak Hill.....	St. Marks.....	Wellborn.....
Bradford.....	Bowling Park.....	Billiard.....	Lee.....	Ocala.....	St. Petersburg....	West Kissimmee...
Bristoi.....	Bunnell.....	Buba Sound.....	Leesburg.....	Okeechobee.....	Salt Springs.....	West Palm Beach...
Bronson.....	East Orange.....	Bolley Navarro....	Lehigh Acres.....	Oklawaha.....	San Antonio.....	Westville.....
Brookar.....	Eastpoint.....	Bollywood.....	Live Oak.....	Old Town.....	Sanderson.....	Weslitchka.....
Breakville.....	East Gullie.....	Bonnetwood.....	Lynn Haven.....	Orange City.....	Sanford.....	White Springs.....
Bunnell.....	Englewood.....	Bonnessa Springs..	Luraville.....	Orange Park.....	Sanibel-Captiva...	Wildwood.....
Bushnell.....	Eustis.....	Bosford.....	MacCluney.....	Orange Springs....	Santa Rosa Beach..	Williston.....
Callahan.....	Everglades.....	Boway.....	Madison.....	Orlando.....	Sarasota.....	Windsore.....
Centerton.....	Fernandina Beach..	Buizen.....	Malone.....	Oviedo.....	Seagrave Beach....	Winter Garden....
Cape Coral.....	Flagler Beach.....	Immolise.....	Marathon.....	Pace.....	Sebastian.....	Winter Haven....
Cape Haze.....	Florahome.....	Indian Lake.....	Marco Island.....	Pahokee.....	Sebring.....	Winter Park.....
Carrollville.....	Flo Bays Ranch....	Indiantown.....	Marianna.....	Palatka.....	Shalimar.....	Yankeetown.....
Cedar Keys.....	Forest.....	Interlachen.....	Maxville.....	Palm Coast.....	Silver Spa.Shores..	Youngstown-fount..
Century.....	Ft. George.....	Inverness.....	Mayo.....	Palmetto.....	Sneeds.....	Yulee.....
Chattahoochee....	Ft. Lauderdale....	Islenarade.....	McIntosh.....	Panacea.....	Sepchopy.....	Zephyrhills.....
						Zolfo Springs.....

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

REGISTRATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF REVENUE
Sandra B. Merritt
Secretary
Department of Revenue, Tallahassee, Florida

DOCUMENT # **H50753** (3)

J.F.G. ASSOCIATES, INC.

28 3/23/95

550 N REO ST. STE 300
TAMPA FL 33609

550 N REO ST. STE 300
TAMPA FL 33609

DO NOT WRITE IN THIS SPACE

2		2a Mailing Address		3 Date Incorporated or Qualified 04/04/1985		3a Date of Incorporation 03/08/1994	
21		26		4 FEI Number 59-2555896		5 Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee <input type="checkbox"/> \$5.00 May Be Added to Fees	
22		27		6 Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		8 This corporation has liability for intangible tax under Section 199.2 Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
23		28		9 Name and Address of Current Registered Agent		10 Name and Address of New Registered Agent	
24		29		25		30	

HARPLEY, R. JAY
1602 W SLUGH AV
SUITE 100
TAMPA FL 33604

81	82 Street Address	83	84 City	85 State
				FL

11. I, the undersigned, being duly sworn, depose and say that the foregoing is a true and correct copy of the annual report of the corporation as required by Section 607, Florida Statutes. Such change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent for the corporation as required by Section 607.2 Florida Statutes.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1995	
NAME	P GARVEY, JOHN F. 13626 DIAMOND HEAD DRIVE TAMPA FL	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
STREET ADDRESS		12 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
CITY, ST, ZIP		13 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Add
		14 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
		15 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
		16 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
		17 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Add
		18 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
		19 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
		20 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
		21 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Add
		22 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
		23 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
		24 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Add
		25 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Add
		26 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add

14. I, the undersigned, being duly sworn, depose and say that the foregoing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(4) Florida Statutes. I further depose and say that the information contained herein is true and accurate and that my signature shall have the same legal effect as if made by the duly authorized officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in the Florida Department of Revenue's annual report with an address.

SIGNATURE: *John F. Garvey*
TITLE: DIRECTOR

1/20/95 813-289-6541

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

Section 1

1. The Centers of Westshore
Fictitious Name to be Registered

2. 550 N. Reo Street
Mailing Address of Business
Suite 300

City Tampa, Florida 33609
Zip Code

3. Florida County Hillsborough

4. FEI Number: _____

This space for office use only

Section 2

A. Owner(s) of Fictitious Name if Individual(s) (use an attachment if necessary):

1. _____ Last First MI _____ Address _____ City State Zip Code SS# _____	2. _____ Last First MI _____ Address _____ City State Zip Code SS# _____
--	--

B. Owner(s) of Fictitious Name if Corporation(s) (use an attachment if necessary):

1. <u>J.F.G. Associates, Inc.</u> Corporate Name <u>550 N. Reo Street, Suite 300</u> Address <u>Tampa, FL 33609</u> City State Zip Code Florida Corporate Document No.: <u>H50753</u> FEI Number: <u>59-2555896</u> <input type="checkbox"/> Applied for <input type="checkbox"/> Not Applicable	2. _____ Corporate Name _____ Address _____ City State Zip Code Florida Corporate Document No.: _____ FEI Number: _____ <input type="checkbox"/> Applied for <input type="checkbox"/> Not Applicable
--	--

Section 3

I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate. I (we) further certify that the fictitious name shown in Section 1 of this form has been advertised at least once in a newspaper as defined in chapter 50, Florida Statutes, in the county where the applicant's principal place of business is located. I (we) understand that the signature(s) below shall have the same legal effect as if made under oath. (At Least One Signature Required)

[Signature] 2-17-92
Signature of Owner Date
Phone Number: 813-289-6541

Signature of Owner Date
Phone Number: _____

Section 4

**FOR CANCELLATION COMPLETE SECTION 4 ONLY:
FOR FICTITIOUS NAME OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:**

I (we) the undersigned, hereby cancel the fictitious name _____
_____, which was registered on _____ and was assigned
registration number _____

Signature of Owner Date

Signature of Owner Date

Mark the applicable boxes Certificate of Status — \$10 Certified Copy — \$30
FILING FEE: \$50

JFG ASSOCIATES d/b/
THE CENTERS OF WESTSHORE
 STATEMENT OF ASSETS, LIABILITIES AND STOCKHOLDERS' EQUITY
 FEBRUARY 28, 1995

ASSETS

CURRENT ASSETS		
Cash	\$	42,179.93
Accounts Receivable		26,124.11
Advances		38,272.68
		38,272.68
TOTAL CURRENT ASSETS		\$ 106,576.72
PROPERTY & EQUIPMENT		
Furniture & Equipment		3,932.11
Office Equipment		161,732.57
Accumulated Depreciation		(159,785.00)
		5,879.68
TOTAL PROPERTY & EQUIPMENT		5,879.68
OTHER ASSETS		
Security Deposits		13,989.00
Accrued Trade Value		4,693.88
		18,682.88
TOTAL OTHER ASSETS		18,682.88
TOTAL ASSETS		\$ 131,139.28

LIABILITIES AND STOCKHOLDERS' EQUITY

CURRENT LIABILITIES		
Sales Tax Payable	\$	3,239.08
Tenant Security Deposits		35,630.92
		38,870.00
TOTAL CURRENT LIABILITIES		\$ 38,870.00
TOTAL LIABILITIES		38,870.00
EQUITY		
Common Stock		500.00
Retained Earnings		38,403.77
Current Income/Loss		53,365.51
		92,269.28
TOTAL EQUITY		92,269.28
TOTAL LIABILITIES AND STOCKHOLDERS' EQUITY		\$ 131,139.28

188. **MANAGERIAL LIST**

JOHN F. GARVEY, OWNER	10 years
DONNA FIORE, OFFICE MANAGER	10 years
SUE DENNIS, COMMUNICATIONS MANAGER	7 years

J.F.G. ASSOCIATES, INC.

Florida Tariff No. 1
Original Sheet 1

TITLE SHEET

FLORIDA TELECOMMUNICATIONS TARIFF

This tariff contains the descriptions, regulations, and rates applicable to the furnishing of service and facilities for telecommunications services provided by J.F.G.ASSOCIATES with principal offices at 550 W. REO ST. SUITE 300 TAMPA, FL. 33609-1065. This tariff applies for services furnished within the state of Florida. This tariff is on file with the Florida Public Service Commission, and copies may be inspected, during normal business hours, at the Company's principal place of business.

Issued: MAY 24, 1996

EFFECTIVE: _____

by:

JOHN. P. GARVEY, OWNER
550 W. REO ST. #300
TAMPA, FL. 33609-1065

TABLE OF CONTENTS

Title Sheet..... 1
Check Sheet..... 2
Table of Contents..... 3
Symbols Sheet..... 4
Tariff Format Sheets..... 5
Section 1 - Technical Terms and Abbreviations..... 6
Section 2 - Rules and Regulations..... 7
Section 3 - Description of Service..... 11
Section 4 - Rates..... 14

Issued: MAY 24, 1996

EFFECTIVE: _____

by:

JOHN F. GARVEY, OWNER
550 N. REO ST. # 300
TAMPA, FL. 33609-1065

TARIFF FORMAT SHEETS

A. Sheet Numbering - Sheet numbers appear in the upper right corner of the page. Sheets are numbered sequentially. However, new sheets are occasionally added to the tariff. When a new sheet is added between sheets already in effect, a decimal is added. For example, a new sheet added between sheets 14 and 15 would be 14.1.

B. Sheet Revision Numbers - Revision numbers also appear in the upper right corner of each page. These numbers are used to determine the most current sheet version on file with the FPSC. For example, the 4th revised Sheet 14 cancels the 3rd revised Sheet 14. Because of various suspension periods, deferrals, etc, the FPSC follows in their tariff approval process, the most current sheet number on file with the Commission is not always the tariff page in effect. Consult the Check Sheet for the sheet currently in effect.

C. Paragraph Numbering Sequence - There are nine levels of paragraph coding. Each level of coding is subservient to its next higher level:

- 2.
- 2.1.
- 2.1.1.
- 2.1.1.A.
- 2.1.1.A.1.
- 2.1.1.A.1.(a).
- 2.1.1.A.1.(a).I.
- 2.1.1.A.1.(a).I.(1).
- 2.1.1.A.1.(a).I.(1).(1).

Issued: MAY 24, 1996

EFFECTIVE: _____

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JOHN. F. GARVEY, OWNER
550 W. REO ST. # 300
TAMPA, FL. 33609-1065

J.P.G. ASSOCIATES, INC.

Florida Tariff No. 1
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JOHN. F. GATVEY, OWNER
550 W. REO ST. #300
TAMPA, FL. 33609-1065

CHECK SHEET

The sheets listed below, which are inclusive of this tariff, are effective as of the date shown at the bottom of the respective sheet(s). Original and revised sheets as named below comprise all changes from the original tariff and are currently in effect as of the date of the bottom of this page.

SHEET	REVISION
1	Original
2	Original
3	Original
4	Original
5	Original
6	Original
7	Original
8	Original
9	Original
10	Original
11	Original
12	Original
13	Original
14	Original

Issued: MAY 24, 1996

EFFECTIVE: _____

by:

JOHN F. GARVEY, OWNER
550 N. RED ST. # 300
TAMPA, FL. 33609-1065

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Issued: MAY 24, 1996

EFFECTIVE: _____

by:

JOHN F. GARVEY, OWNER
550 N. REO ST. # 300
TAMPA, FL. 33609-1065

SYMBOLS SHEET

[PLEASE INCLUDE THE FOLLOWING LIST OF SYMBOLS VERBATIM]

The following are the only symbols used for the purposes indicated below:

- D - Delete Or Discontinue
- I - Change Resulting In An Increase To A Customer's Bill
- M - Moved From Another Tariff Location
- N - New
- R - Change Resulting In A Reduction To A Customer's Bill
- T - Change In Text Or Regulation But No Change In Rate Or Charge

Issued: MAY 24, 1996

EFFECTIVE: _____

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JOHN F. GARVEY, OWNER
550 N. REO ST. # 300
TAMPA, FL. 33609-1065

TARIFF FORMAT SHEETS

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Issued: MAY 24, 1996

by:

JOHN. F. GARVEY, OWNER
550 N. RED ST. # 300
TAMPA, FL. 33609-1065

EFFECTIVE: _____

SECTION 1 - TECHNICAL TERMS AND ABBREVIATIONS

Access Line - An arrangement which connects the customer's location to a network switching center.

Authorization Code - A numerical code, one or more of which are available to a customer to enable him/her to access the carrier, and which are used by the carrier both to prevent unauthorized access to its facilities and to identify the customer for billing purposes.

Company or Carrier - J.F.G. ASSOCIATES, INC.

Customer - the person, firm, corporation or other entity which orders service and is responsible for payment of charges due and compliance with the Company's tariff regulations.

Day - From 8:00 AM up to but not including 5:00 PM local time Sunday through Friday.

Evening - From 5:00 PM up to but not including 11:00 PM local time Sunday through Friday.

Holidays - J.F.G. ASSOCIATES recognized holidays are New Year's Day, Martin Luther King, Jr. Day, Presidents Day, Ground Hog Day, St. Patrick's Day, Memorial Day, July 4th, Labor Day, Thanksgiving Day, Christmas Day.

Night/Weekend - From 11:00 PM up to but not including 8:00 AM Sunday through Friday, and 8:00 AM Saturday up to but not including 5:00 PM Sunday.

Issued: MAY 24, 1996

EFFECTIVE: _____

by:

JOHN F. GARVEY, OWNER
550 W. REO ST. #300
TAMPA, FL 33609-1065

SECTION 2 - RULES AND REGULATIONS

2.1 Undertaking of J.F.G. ASSOCIATES

J.F.G. ASSOC. services and facilities are furnished for communications originating at specified points within the state of Florida under terms of this Tariff.

J.F.G. ASSOC. installs operates, and maintains the communications services provided herein in accordance with the terms and conditions set forth under this Tariff. It may act as the customer's agent for ordering access connection facilities provided by other carriers or entities when authorized by the customer, to allow connection of a customer's location to the J.F.G. ASSOC. network. The customer shall be responsible for all charges due for such service arrangement.

The Company's services and facilities are provided on a monthly basis unless ordered on a longer term basis, and are available twenty-four hours per day, seven days per week.

2.2 Limitations

2.2.1 Service is offered subject to the availability of facilities and provisions of this tariff.

2.2.2 J.F.G. ASSOC. reserves the right to discontinue furnishing service, or limit the use of service necessitated by conditions beyond its control; or when the customer is using service in violation of the law or the provisions of this Tariff.

2.2.3 All facilities provided under this Tariff are directly controlled by J.F.G. ASSOC. and the customer may not transfer or assign the use of service or facilities, except with the express written consent of The Company. Such transfer or assignment shall only apply where there is no interruption of the use or location of the service or facilities.

Issued: MAY 24, 1996

EFFECTIVE: _____

by:

JOHN F. GARVEY, OWNER
550 W. REBO ST. # 300
TAMPA, FL. 33609-1065

SECTION 2 - RULES AND REGULATIONS

2.2 Limitations (Cont.)

2.2.4 Prior written permission from The Company is required before any assignment or transfer. All regulations and conditions contained in this Tariff shall apply to all such permitted assignees or transferees, as well as all conditions for service.

2.3 Liabilities of The Company

2.3.1 J.F.G. ASSOC. liability for damages arising out of mistakes, interruptions, omissions, delays, errors, or defects in the transmission occurring in the course of furnishing service or facilities, and not caused by the negligence of its employees or its agents, in no event shall exceed an amount equivalent to the proportionate charge to the customer for the period during which the aforementioned faults in transmission occur.

2.3.2 J.F.G. ASSOC. shall be indemnified and held harmless by the customer against:

- (A) Claims for libel, slander, or infringement of copyright arising out of the material, data, information, or other content transmitted over The Company's facilities.
- (B) All other claims arising out of any act or omission of the customer in connection with any service or facility provided by J.F.G. ASSOCIATES.

Issued: MAY 24, 1996

EFFECTIVE: _____

by:

JOHN F. GARVEY, OWNER
550 W. RED ST. # 300
TAMPA, FL. 33609-1065

SECTION 2 - RULES AND REGULATIONS

2.4 Interruption of Service

- 2.4.1 Credit allowance for the interruption of service which is not due to The Company's testing or adjusting, negligence or the customer, or to the failure of channels or equipment provided by the customer, are subject to the general liability provisions set forth in 2.3.1 herein. It shall be the obligation of the customer to notify The Company immediately of any interruption in service for which a credit allowance is desired. Before giving such notice, the customer shall ascertain that the trouble is not being caused by any action or omission by the customer within his control, if any, furnished by the customer and connected to The Company's facilities.
- 2.4.2 For purposes of credit computation, every month shall be considered to have 720 hours.
- 2.4.3 No credit shall be allowed for an interruption of a continuous duration of less than two hours.
- 2.4.4 The customer shall be credited for an interruption of two hours or more at the rate of 1/720th of the monthly charge for the facilities affected for each hour or major fraction thereof that the interruption continues.

Credit Formula:

Credit = $A/720 \times B$

"A" - outage time in hours

"B" - total monthly charge for affected facility

Issued: MAY 24, 1996

EFFECTIVE: _____

by:

JOHN F. GARVEY, OWNER
550 N. REO ST. # 300
TAMPA, FL. 33609-1065

SECTION 2 - RULES AND REGULATIONS

2.5 Deposits

The Company does not require a deposit from the customer.

2.6 Advance Payments

For customers whom the Company feels an advance payment is necessary, the Company reserves the right to collect an amount not to exceed one (1) month's estimated charges as an advance payment for service. This will be applied against the next month's charges and if necessary a new advance payment will be collected for the next month.

2.7 Taxes

All state and local taxes (i.e., gross receipts tax, sales tax, municipal utilities tax) are listed as separate line items and are not included in the quoted rates.

Issued: MAY 24, 1996

EFFECTIVE: _____

by:

JOHN F. GARVEY, OWNER
550 N. REO ST. #300
TAMPA, FL. 33609-1065

SECTION 3 - DESCRIPTION OF SERVICE

3.1 Timing of Calls

3.1.1 When Billing Charges Begin and Terminate For Phone Calls

The customer's long distance usage charge is based on the actual usage of J.F.G. ASSOCIATES network. Usage begins when the called party picks up the receiver, (i.e. When 2 way communication, often referred to as "conversation time" is possible.). When the called party picks up is determined by hardware answer supervision in which the local telephone company sends a signal to the switch or the software utilizing audio tone detection. When software answer supervision is employed, up to 60 seconds of ringing is allowed before it is billed as usage of the network. A call is terminated when the calling or called party hangs up.

3.1.2 Billing Increments

Unless otherwise specified in this tariff, the minimum call duration for billing purposes is 1 minute for a connected call. Calls beyond 1 minute are billed in 1 minute increments.

3.1.3 Per Call Billing Charges

Billing will be rounded up to the nearest penny for each call.

3.1.4 Uncompleted Calls

There shall be no charges for uncompleted calls.

Issued: MAY 24, 1996

EFFECTIVE: _____

by:

JOHN F. GARVEY, OWNER
550 N. REO ST. # 300
TAMPA, FL. 33609-1065

SECTION 3 - DESCRIPTION OF SERVICE

3.2 Billing of Calls

All charges due by the subscriber are payable at any agency duly authorized to receive such payments. Any objection to billed charges should be promptly reported to the Company. Adjustments to customers' bills shall be made to the extent that records are available and/or circumstances exist which reasonably indicate that such charges are not in accordance with approved rates or that an adjustment may otherwise be appropriate.

3.3 Payment of Calls

3.3.1 Late Payment Charges

Interest charges of 1 1/2% per month may be assessed on all unpaid balances more than thirty days old.

3.3.2 Return Check Charges

A return check charge of \$20.00 or 5% of the amount of the check, whichever is greater, will be assessed for checks returned for insufficient funds.

3.4 Restoration of Service

A reconnection fee of \$25.00 per occurrence is charged when service is re-established for customers who had been disconnected for non-payment.

Issued: MAY 24, 1996

EFFECTIVE: _____

by:

JOHN F. GARVEY, OWNER
550 N. REO ST. # 300
TAMPA, FL. 33609-1065

SECTION 3 - DESCRIPTION OF SERVICE

3.5 Minimum Call Completion Rate

A customer can expect a call completion rate [EXPRESSED AS A PERCENTAGE] (number of calls completed / number of calls attempted) of not less than 90% during peak use periods for all FC D services ("1+" dialing).

3.6 Service Offerings

3.6.1. Flat Rate 1

Flat Rate 1 is a flat rate, direct access, inter/intrastate service designated for all customers.

3.6.2 800 Flat Rate 1

800 Flat Rate 1 is a flat rate service designated for all customers.

Issued: MAY 24, 1996

EFFECTIVE: _____

by:

JOHN F. GARVEY, OWNER
550 N. RBO ST. # 300
TAMPA, FL. 33609-1065

SECTION 4 - RATES

4.1 Flat Rate 1

All calls at \$.17 per minute.

4.2 800 Flat Rate 1

All calls at \$.18 per minute.

Issued: MAY 24, 1996

EFFECTIVE: _____

by:

JOHN F. GARVEY, OWNER
550 W. REO ST. # 300
TAMPA, FL. 33609-1065

D322 =

JUN - 3 '96 96

3. Name of corporation, partnership, cooperative, joint venture or sole proprietorship:

J.F.G. ASSOCIATES, INC.

4. Name under which the applicant will do business (fictitious name, etc.):

THE CENTERS OF WESTSHORE

5. National address (including street name & number, post office box, city, state and zip code).

550 W. REO ST. SUITE 300
TAMPA, FL. 33609-1065

6. Florida address (including street name & number, post office box, city, state and zip code):

550 W. REO ST. SUITE 300
TAMPA, FL. 33609-1065

7. Structure of organization;

- Individual
- Foreign Corporation
- General Partnership
- Other, _____
- Corporation
- Foreign Partnership
- Limited Partnership

8. If applicant is an individual or partnership, please give name, title and address of sole proprietor or partners. N/A BUSINESS IS A CORPORATION.

(a) Provide proof of compliance with the foreign limited partnership statute (Chapter 620.15 FS), if applicable.

(b) Indicate if the individual or any of the partners have previously been:

(1) adjudged bankrupt, mentally incompetent, or found guilty of any felony or of any crime, or whether such actions may result from pending proceedings.

DOCUMENT NUMBER DATE

06067 JUN-38

FPSC-RECORDS/REPORTING

\$ 250.00

Dollars

James F. ...

Commissioners:
SUSAN F. CLARK, CHAIRMAN
J. TERRY DEASON
JULIA L. JOHNSON
DIANE K. KIESLING
JOE GARCIA



DIVISION OF RECORDS &
REPORTING
BLANCA S. BAYÓ
DIRECTOR
(904) 413-6770

Public Service Commission

June 4, 1996

J.F.G. Associates, Inc.
550 N. REO Street, Suite 300
Tampa, Florida 33609-1065

Docket No. 960696-TI

This will acknowledge receipt of an application for certificate to provide interexchanges telecommunications service by J.F.G. ASSOCIATES, INC., which was filed in this office on June 3, 1996 and assigned the above-referenced docket number. Appropriate staff members will be advised.

A tentative schedule of events in your docket (referred to as a Case Assignment and Scheduling Record or CASR) should be available, upon request, ten (10) working days after establishment of the docket. You may contact the Records Section at (904) 413-6770 or by fax at (904) 413-7118 to request that a copy of the case schedule be faxed or mailed to you. The schedule of events provides you with an opportunity to anticipate completion stages of work in the docket. These dates are subject to change; therefore, you may wish to call the Records Section periodically to obtain revised schedules for your docket. For firm dates of hearings or other activities, please look to the Commission's official notices and orders. You can also obtain information on your docket by accessing the PSC HomePage on the Internet, at <http://www.state.fl.us/psc/>.

Sincerely,

A handwritten signature in black ink that reads "Linda C. Williams".

Linda C. Williams
Commission Deputy Clerk Supervisor