

REQUEST TO ESTABLISH DOCKET
(PLEASE TYPE)

Date 2/11/98

Docket No. 9800001

- 1. Division Name/Staff Name COMMUNICATIONS/Hawkins
- 2. OPR _____
- 3. OCR _____

4. Suggested Docket Title Request for cancellation of Pay Telephone Certificate No. 4321 by Jacksonville Putt-Putt Golf & Games, Inc. a/o/a Adventure Landing effective 2/2/98

5. Suggested Docket Mailing List (attach separate sheet if necessary)

- A. Provide NAMES ONLY for regulated companies or ACRONYMS ONLY regulated industries, as shown in Rule 25-22.104, F.A.C.
- B. Provide COMPLETE name and address for all others. (Match representatives to clients.)

(TF811)

1. Parties and their representatives (if any)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. Interested Persons and their representatives (if any)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

6. Check one: Documentation is attached.
 Documentation will be provided with the recommendation.

TFBII

NOT
CORRECT!

12-17-97

To Whom it May Concern,

Adventure Landing would like to request that we cancel our certificate for payphones. We no longer possess the telephones and will not in the future.

If you have any questions please call Joe Laver at 904-246-4386 ext. 206.

Brendan

The Envelope was postmarked

Jan 30 1998

received in mailroom 2/2/98.

C

RECEIVED

JAN 06 1998

CMU

Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS:

Actual Return
 Estimated Return

PERIOD COVERED:
 01/01/1997 TO 12/31/1997

Florida Public Service Commission
 (See Filing Instructions on Back of Form)

TF811 P173 997 083
 Adventure Landing
 1944 Beach Blvd.
 Jacksonville Beach, FL 32250-2647
 DATE
 D708 FEB 02 1998

98 FEB -2 MAIL ROOM

FOR PSC USE ONLY
 Check# 1885
 \$ 50.00 0603002
 003001
 P
 0603002
 004011
 1
 Postmark Date 1-30-98
 Initials of Preparer JKB

Please Complete Below If Address Has Changed

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

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue	\$ 0
2.	Gross Intrastate Revenue	
3.	LESS: Amounts Paid for Services to Local Telephone Companies (Attach Listing)*	()
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ 0
5.	Regulatory Assessment Fee Due — (Multiply Line 4 by 0.0015)	
6.	Penalty for Late Payment	
7.	Interest for Late Payment	
8.	TOTAL AMOUNT DUE	\$ 50.00

AS PROVIDED IN SECTION 364.336 FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50

THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUES REPORTED

9. Number of pay telephones in operation at close of period covered by this Return 0

(POSTMARKED 1/31/98) Cancellation letter → Brenda Hawkins CB

*Each amount paid by a pay telephone company to a telecommunications company providing local service for use of the local network shall be deducted from intrastate revenue for purposes of determining the amount of the regulatory fee assessed the pay telephone company.

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to be 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.

Mark A Rine
 (Signature of Company Official)

CFO
 (Title) 1-24-98
 (Date)

MARK A RINE
 (Please Print Name)

Telephone Number ()

F.E.I. No. _____