

FLORIDA PUBLIC SERVICE COMMISSION
CAPITAL CIRCLE OFFICE CENTER - 2540 SHUMARD OAK BOULEVARD
TALLAHASSEE, FLORIDA 32399-0850

APPLICATION FORM **FD-303** DATE
for **D033** NOV 13 1998

**AUTHORITY TO PROVIDE (ALEC)
ALTERNATIVE LOCAL EXCHANGE SERVICE
WITHIN THE STATE OF FLORIDA**

INSTRUCTIONS

- ◆ This form is used for an original application for a certificate and for approval of sale, assignment or transfer of an existing alternative local exchange certificate. In case of a sale, assignment or transfer, the information provided shall be for the purchaser, assignee or transferee.
- ◆ Respond to each item requested in the application and appendices. If an item is not applicable, please explain why.
- ◆ Use a separate sheet for each answer which will not fit the allotted space.
- ◆ If you have questions about completing the form, contact:

**Florida Public Service Commission
Division of Communications
Certification & Compliance Section
2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0866
(850) 413-6600**

- ◆ Once completed, submit the original and six (6) copies of this form along with a non-refundable application fee of \$250 made payable to the Florida Public Service Commission at the above address.

FORM PSC/CMU 8 (11/86)
Required by Chapter 384.337 F.S.

DOCUMENT NUMBER DATE

12737 NOV 13 8

FPSC-RECORDS/REPORTING

RECEIVED
COMMUNICATIONS SECTION
NOV 13 1998
MAIL ROOM

APPLICATION FORM

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

Original authority (new company)

Approval of transfer (to another certificated company)

Example, a certificated company purchases an existing company and desires to retain the original certificate authority.

Approval of assignment of existing certificate
(to a noncertificated company)

Example, a non-certificated company purchases an existing company and desires to retain the certificate of authority rather than apply for a new certificate.

Approval for transfer of control (to another certificated company)

Example, a company purchases 51% of a certificated company. The Commission must approve the new controlling entity.

2. Name of applicant:

APPLIANCE & TV RENTALS, INC.

3. Name under which the applicant will do business (d/b/a):

Phones-4-A11

4. If applicable, please provide proof of fictitious name (d/b/a) registration.

Fictitious name registration number: G98258000137

APPLICATION FORM

8. State whether any of the officers, directors, or any of the ten largest stockholders have previously been adjudged bankrupt, mentally incompetent, or found guilty of any felony or of any crime, or whether such actions may result from pending proceedings. If so, please explain.

N/A

9. If incorporated, please provide proof from the Florida Secretary of State that the applicant has authority to operate in Florida.

Corporate charter number: G-78340

10. Please provide the name, title, address, telephone number, Internet address, and facsimile number for the person serving as ongoing liaison with the Commission, and if different, the liaison responsible for this application.

Bridget Swain, Manager 4513 S. U.S. Hwy 1 Ft. Pierce
Florida, 34982 (561) 468-0018 Phone (561) 468-4336 Fax #

bridgett@gate.net

Liaison responsible for application: David N. Ring

11. Please list other states in which the applicant is currently providing or has applied to provide local exchange or alternative local exchange service.

Alabama, Georgia, Tennessee, Mississippi, South Carolina,

Nevada, and Utah

TITLE SHEETFLORIDA TELECOMMUNICATIONS PRICE LIST

This price list contains the descriptions, regulations, service standards and rates applicable to the furnishing of service and facilities for telecommunications services provided by PHONES-4-ALL with principal offices at 961 S. Ferdon Blvd., Crestview, FL 32536. This price list applies for services furnished within the state of Florida. This price list is on file with the Florida Public Service Commission, and copies may be inspected, during normal business hours at the Company's place of business.

ISSUED: October 26, 1998

EFFECTIVE: _____

by:

DAVID N. RING, PRESIDENT
961 S. FERDON BLVD.
~~CRESTVIEW, FL~~ 32536
Crestview

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2. Name of applicant:

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Phones-4-All

4. If applicable, please provide proof of fictitious name (d/b/a) registration.

Fictitious name registration number: G98258000J 37

APPLICATION FORM

5. A. National mailing address including street name, number, post office box, city, state, zip code, and phone number.

961 S. Ferdon Blvd.

P.O. Box 535

Crestview, FL 32536

(850) 682-0475

- B. Florida mailing address including street name, number, post office box, city, state, zip code, and phone number.

4513 S. U.S. Hwy 1

Pt. Pierce, FL 34982

(561) 468-0018

6. Structure of organization: Check appropriate box(s)

| | |
|--|--|
| <input type="checkbox"/> Individual | <input 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"/> Joint Venture | <input checked="" type="checkbox"/> Other, Please explain <u>S Corporation</u> |

7. If applicant is an individual, partnership, or joint venture, please give name, title and address of each legal entity.

N/A

APPLICATION FORM

8. State whether any of the officers, directors, or any of the ten largest stockholders have previously been adjudged bankrupt, mentally incompetent, or found guilty of any felony or of any crime, or whether such actions may result from pending proceedings. If so, please explain.

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Florida, 34982 (561) 468-0018 Phone (561) 468-4336 Fax #

bridgett@gate.net

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Alabama, Georgia, Tennessee, Mississippi, South Carolina,

Nevada, and Utah

APPLICATION FORM

12. Has the applicant been denied certification in any other state? If so, please list the state and reason for denial.

No

13. Have penalties been imposed against the applicant in any other state? If so, please list the state and reason for penalty.

NO

14. Please indicate how a customer can file a service complaint with your company.
- The customer will have the option of contacting their local
Phones-4-All location, or calling an 800 number that will
connect them directly to Corporate Headquarters. The complaint
~~will be taken and the appropriate service center contacted.~~
Trouble will be corrected and once cleared we will notify
the customer.
-
-

15. Please complete and file a price list in accordance with Commission Rule 25-24.825.(Rule attached)

See Attached

16. Please provide all available documentation demonstrating that the applicant has the following capabilities to provide alternative local exchange service in Florida.

A. Financial capability.

Regarding the showing of financial capability, the following applies:

The application should contain the applicant's financial statements for the most recent 3 years, including:

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~~CRESTVIEW, FL~~ 32536
Crestview

CHECK SHEET

The sheets listed below, which are inclusive of this price list, 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 price list and are currently in effect as of the date of the bottom of this page.

| <u>SHEET</u> | <u>REVISION</u> |
|--------------|-----------------|
| 1 | Original |
| 2 | Original |
| 3 | Original |
| 4 | Original |
| 5 | Original |
| 6 | Original |
| 7 | Original |
| 8 | Original |
| 9 | Original |
| 10 | Original |
| 11 | Original |

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961 S. FERDON BLVD.
~~CRESTVIEW~~, FL 32536
Crestview

TABLE OF CONTENTS

Title Sheet.....11
Check Sheet.....2
Table of Contents.....3
Symbols Sheet.....4
Price List Format Sheets5
Exchange Service List.....7
Section 1 - Technical Terms and Abbreviations.....8
Section 2 - Rules, Regulations and Service Quality Criteria...9
Section 3 - Basic service Description and Rates10
Section 4 - Non Basic Service Description and Rates11

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SYMBOLS SHEET

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 Price List 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
- P - Payment Received On Time
- RCP - Reconnect Payment
- FA - Feature Added
- FD - Feature Deleted

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PRICE LIST 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 price list. When a new sheet is added between sheets already in effect, a decimal is added. (Example would be sheets between one and two would be 1.2)

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.

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.(i).
2.1.1.A.1.(a).I.(i).(1).

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PRICE LIST FORMAT SHEETS

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961 S. FERDON BLVD.

~~CRESTVIEW~~ FL 32536
Crestview

EXCHANGE SERVICE LIST

The Entire State of Florida

ISSUED: October 26, 1998

EFFECTIVE: _____

by:

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961 S. FERDON BLVD.

~~CRESTVIEW~~ FL 32536
Crestview

SECTION 1 - TECHNICAL TERMS AND ABBREVIATIONS

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

Company or Carrier - PHONES-4-ALL

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 price list regulations.

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

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

Holidays - PHONES-4-ALL recognized holidays are New Year's Day, July 4, Labor Day, Thanksgiving Day, Christmas Day, and Memorial 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:

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SECTION 2 - RULES, REGULATIONS AND SERVICE QUALITY CRITERIA**2.1 Undertaking of: Phones-4-All**

2.2 Limitations: Local Prepaid phone service only. This does not include an extended local calling area, long distance, or collect calls. In the event we are unable to block these calls, the customer is responsible for any and all charges incurred.

2.3 Liabilities of the Company: Phones-4-All and or its dealers will be held "harmless" against claims or damages that arise from accidental disconnect, including but not limited to any inability to access 911.

2.4 Service Availability: Service is to the residence or business only. The customer is responsible for maintaining the wiring and jacks along with his or her telephone within an agreed residence or business.

2.5 Interruption of Service: Non-Payment of Regulated Charges on a specified date, as agreed, will result in discontinuance of service. Any reconnection, would involve a Reconnect charge that will be determined by Corporate Headquarters.

2.6 Deposits and Advance Payments: A one time Non-Refundable processing fee of \$_____, will be due at the time of application for service. (Payments can only be made in the form of cash, money order or cashiers check.) The Non-Refundable processing fee includes the customers first month of pre-paid phone service.

2.7 Taxes: All applicable taxes will be billed monthly to the customer. Applicable taxes will not be collected along with the one time processing fee and therefore customers first billing may appear slightly higher than most.

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SECTION 3 - BASIC SERVICE DESCRIPTIONS AND RATES

3.1 Service Offerings: RESALE

ISSUED: October 26, 1998

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961 S. FERDON BLVD.
~~CRESTVIEW~~, FL 32536
Crestview

SECTION 4 - NON BASIC SERVICE DESCRIPTIONS AND RATES

4.1 Service Offerings:

| | |
|----------------------|----------|
| Non-published number | \$ _____ |
| Call Return | \$ _____ |
| Call Waiting | \$ _____ |
| 3-Way Calling | \$ _____ |
| Caller ID | \$ _____ |

These services are available at additional cost to the customer. The additional cost of these services, will be added to their regular monthly billing.

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~~CRESTVIEW~~, FL 32536
Crestview

David N. Ring

Employment

1984 - Present

Speedee Cash Management Company, Inc. Crestview, FL

President and Sole Owner

- In 1984 I founded a small business, providing rent-to-own appliances and furniture. As owner and sole employee, I was responsible for all business operations and functions. As other business ventures became available, I expanded and diversified, gradually building the Company into a multi-state enterprise, with current gross revenue of over \$11 million, and employing more than 150 personnel. I oversee the management, develop new ventures, and oversee the company's finances, as owner and President. I still maintain a hands-on role with management.

1983 - 1984

District Sales Representative, Westinghouse Credit Corporation

- Solicit new business, follow up on all prospects, and maintain business with current dealers.

1972 - 1983

Sales/Service Representative, General Electric Credit Corporation

- Throughout the 11 years with GECC, I developed skills in auditing, managing retail contracts, collections, floor inventories and financing, supervising personnel, maintaining on-going business contacts, budgeting, pricing for profit, projecting, marketing, and soliciting new business.

Education

1970 - 1972

University of West Florida

Pensacola, FL

- Bachelor of Science/Marketing

1968 - 1970

Pensacola Junior College

Pensacola, FL

- Associate of Arts

Personal

Married - 27 years, 3 children

APPLIANCE & TV RENTALS, INC.
 STATEMENT OF ASSETS, LIABILITIES, & STOCKHOLDERS' EQUITY
 FOR THE NINE MONTHS ENDED SEPTEMBER 30, 1998

| ASSETS | CURRENT | PRIOR YEAR |
|----------------------------|------------------------|------------------------|
| Cash | 303,837.97 | 230,787.99 |
| Loans Receivable, Pawn | - | - |
| Loans Receivable, Title | 2,550,764.05 | 2,236,564.45 |
| Payroll Advance Receivable | 74,561.50 | - |
| Inventory | - | - |
| Property and Equipment-net | 109,136.00 | 121,127.75 |
| Other Assets | 27,613.21 | 4,000.00 |
| | ----- | ----- |
| Total Assets | \$ 3,065,912.73 | \$ 2,592,480.19 |

**LIABILITIES AND
 SHAREHOLDERS' EQUITY**

| | | |
|--|------------------------|------------------------|
| Deferred Income | 85,848.67 | 85,848.67 |
| Due Shareholders | 100,000.00 | 100,000.00 |
| Note Payable - Finova | - | - |
| Other Debt | - | - |
| Total Liabilities | 185,848.67 | 185,848.67 |
| Due to and <From> Affiliated Companies | (346,538.95) | - |
| STOCKHOLDERS' EQUITY | | |
| Capital Stock | 2,000.00 | 2,000.00 |
| Paid In capital | 2,011,182.00 | 1,778,390.00 |
| Stockholders' Distribution | - | (1,441,211.26) |
| Retained Earnings | 660,031.94 | 1,459,381.00 |
| Year to Date Earnings | 553,389.07 | 608,071.78 |
| | ----- | ----- |
| TOTAL STOCKHOLDERS' EQUITY | 3,226,603.01 | 2,406,631.52 |
| TOTAL LIABILITIES AND STOCKHOLDERS' EQUITY | \$ 3,065,912.73 | \$ 2,592,480.19 |

THESE ARE UNAUDITED FINANCIAL STATEMENTS TO BE USED FOR INFORMATIONAL PURPOSES ONLY

I attest that these statements are true & correct.

Patti Mann, Accountant

APPLIANCE & TV RENTALS, INC.
 STATEMENT OF REVENUES, EXPENSES, & STOCKHOLDERS' EQUITY
 FOR THE NINE MONTHS ENDED SEPTEMBER 30, 1998

| | CURRENT | PRIOR YEAR |
|---|---------------------|---------------------|
| REVENUES | | |
| LOANS INTEREST | \$ 3,413,681.31 | \$ 2,960,812.60 |
| OTHER INCOME | 21,037.14 | 12,190.99 |
| | - | - |
| TOTAL REVENUES | 3,434,718.45 | 2,973,003.59 |
| EXPENSES | | |
| General & Administrative Expense: | | |
| Merchandise | | |
| Personnel | 811,099.47 | 573,018.97 |
| Rent | 336,737.96 | 236,147.58 |
| Insurance | 39,754.60 | 4,152.35 |
| Licenses | 6,562.51 | 3,632.45 |
| Advertising | 200,922.29 | 193,726.18 |
| Utilities | 54,435.71 | 45,013.45 |
| Telephone | 77,436.64 | 60,361.37 |
| Repairs & Maint. | 34,939.51 | 18,919.71 |
| Repo Fees | 91,800.58 | 116,809.50 |
| Travel | 18,853.49 | 9,187.62 |
| Office Supplies | 60,778.39 | 46,728.46 |
| Office Equipment | 7,641.12 | 17,781.28 |
| Other (Postage, Bank Charges, etc.) | 46,907.84 | 72,060.00 |
| Interest | 39,764.60 | - |
| Bad Debts | 311,194.67 | 251,892.89 |
| | - | - |
| Total Expenses | 2,138,829.38 | 1,649,431.81 |
| Net Operating Revenues | 1,295,889.07 | 1,323,571.78 |
| Affiliated Companies Revenue and Expenses: | | |
| Management Fees Received and <Paid> | (742,500.00) | (715,500.00) |
| NET INCOME | 553,389.07 | 608,071.78 |

THESE ARE UNAUDITED FINANCIAL STATEMENTS TO BE USED FOR INFORMATIONAL PURPOSES ONLY

APPLICATION FORM

1. the balance sheet
2. income statement
3. statement of retained earnings.

Further, a written explanation, which can include supporting documentation, regarding the following should be provided to show financial capability.

1. Please provide documentation that the applicant has sufficient financial capability to provide the requested service in the geographic area proposed to be served.
2. Please provide documentation that the applicant has sufficient financial capability to maintain the requested service.
3. Please provide documentation that the applicant has sufficient financial capability to meet its lease or ownership obligations.

NOTE: This documentation may include, but is not limited to, financial statements, a projected profit and loss statement, credit references, credit bureau reports, and descriptions of business relationships with financial institutions.

If available, the financial statements should be audited financial statements.

If the applicant does not have audited financial statements, it shall be so stated. The unaudited financial statements should then be signed by the applicant's chief executive officer and chief financial officer. The signatures should attest that the financial statements are true and correct.

B. Managerial capability. David N. Ring Resume Attached

C. Technical capability. Resale

(If you will be providing local intra-exchange switched telecommunications service, then state how you will provide access to 911 emergency service. If the nature of the emergency 911 service access and funding mechanism is not equivalent to that provided by the local exchange companies in the areas to be served, described in detail the difference.)

FLORIDA PUBLIC SERVICE COMMISSION
CAPITAL CIRCLE OFFICE CENTER - 2540 SHUMARD OAK BOULEVARD
TALLAHASSEE, FLORIDA 32399-0850

APPLICATION FORM ~~FD-100~~ ^{FD-100} DATE
for **DOSS** NOV 13 1998

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DOCUMENT NUMBER-DATE

12737 NOV 13 98

FPSC-RECORDS/REPORTING

Florida Public Service Commission

SPEEDEE CASH MANAGEMENT COMPANY, INC.
P.O. BOX 535 TL 850-882-0475
CRESTVIEW, FLORIDA 32536 • 0535

FIRST NATIONAL BANK & TRUST
FORT WALTON BEACH, FLORIDA

2400

TWO HUNDRED AND FIFTY DOLLARS & no/100

DATE
11/11/98

AMOUNT
\$250.00

PAY
TO THE
ORDER
OF

FLORIDA PUBLIC SERVICE COMMISSION
DIVISION OF COMMUNICATIONS
2540 SHUMARD OAK BOULEVARD
TALLAHASSEE, FLORIDA 32399-0866

Patti M. Mann
AUTHORIZED SIGNATURE

APPLICATION FORM

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APPLICATION FORM

AFFIDAVIT

By my signature below, I, the undersigned officer, attest to the accuracy of the information contained in this application and attached documents and that the applicant has the technical expertise, managerial ability, and financial capability to provide alternative local exchange service in the State of Florida. I have read the foregoing and declare that to the best of my knowledge and belief, the information is true and correct. I attest that I have the authority to sign on behalf of my company and agree to comply, now and in the future, with all applicable Commission rules and orders.

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, punishable as provided in s. 775.082 and s. 775.083".

Official: *D. J. [Signature]*
Signature

11-6-90
Date

Title: President/Owner

(850) 682-0475
Telephone Number

Address: 961 S. Ferdon Blvd.
Crestview, Fl 32536

FLORIDA PUBLIC SERVICE COMMISSION
CAPITAL CIRCLE OFFICE CENTER - 2540 SHUMARD OAK BOULEVARD
TALLAHASSEE, FLORIDA 32399-0850

APPLICATION FORM

DEPOSIT DATE
for **DOSS** NOV 13 1998

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Florida Public Service Commission

SPEEDEE CASH MANAGEMENT COMPANY, INC.

P.O. BOX 535 TL 850-882-0475
CRESTVIEW, FLORIDA 32536 • 0535

FIRST NATIONAL BANK & TRUST
FORT WALTON BEACH, FLORIDA

2400

TWO HUNDRED AND FIFTY DOLLARS & no/100

DATE
11/11/98

AMOUNT
\$250.00

PAY
TO THE
ORDER
OF

FLORIDA PUBLIC SERVICE COMMISSION
DIVISION OF COMMUNICATIONS
2540 SHUMARD OAK BOULEVARD
TALLAHASSEE, FLORIDA 32399-0866

Patti M Mann
AUTHORIZED SIGNATURE