

**REQUEST TO ESTABLISH DOCKET**  
(PLEASE TYPE)

Date August 30, 1999

Docket No. 991247-TC

- 1. Division Name/Staff Name Communications/Isler
- 2. OPR Communications/Isler
- 3. OCR Legal Services/K. Pefia; C. Bedell
- 4. Suggested Docket Title Cancellation by Florida Public Service Commission of PATS Certificate No. 2250 Issued to Walker Memorial Hospital, for Violation of Rule 25-4.0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies

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.)

1. Parties and their representatives (if any)

<u>G. J. Newmyer</u>	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. Interested Persons and their representatives (if any)

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

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

I:\PSC\RAR\WP\ESTDKT.  
PSC/RAR 10 (Revised 01/96)

DOCUMENT NUMBER-DATE  
**10356 AUG 30 99**  
FPSC-RECORDS/REPORTING

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From: RREIMER @ SMTP (Reimer, Randy) {RReimer@ahss.org}  
To: Paula Isler  
Subject: Pay telephone certificate

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===NOTE=====8/18/99--5:27pm=====

Return-Path: <RReimer@ahss.org>  
Received: from ahss.org (204.139.85.5)  
by mail.psc.state.fl.us (Connect2-SMTP 4.30A.1000128)  
for <pisler@psc.state.fl.us>; Wed, 18 Aug 1999 17:32:53 -0400  
Received: by gateway.ahss.org id <115220>; Wed, 18 Aug 1999 17:32:08 -0400  
Message-Id: <99Aug18.173208edt.115220@gateway.ahss.org>  
From: "Reimer, Randy" <RReimer@ahss.org>  
To: "'pisler@psc.state.fl.us'" <pisler@psc.state.fl.us>  
Subject: Pay telephone certificate  
Date: Wed, 18 Aug 1999 17:27:32 -0400  
Return-Receipt-To: "Reimer, Randy" <RReimer@ahss.org>  
MIME-Version: 1.0  
X-Mailer: Internet Mail Service (5.5.2448.0)  
Content-Type: text/plain

Paula,  
We will not be applying for a new certificate under the name of Adventist Health System. Please cancel our Walker Memorial certificate as requested.  
Randy Reimer

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STATE OF FLORIDA

Commissioners:  
JOE GARCIA, CHAIRMAN  
J. TERRY DEASON  
SUSAN F. CLARK  
JULIA L. JOHNSON  
E. LEON JACOBS, JR.



DIVISION OF  
TELECOMMUNICATIONS  
WALTER D'HAESELEER  
DIRECTOR  
(850) 413-6600

**Public Service Commission**

July 20, 1999

Mr. Randall Reimer, Controller  
Florida Hospital Heartland Division  
PO Box 9400  
Sebring, FL 33871-9400

Dear Mr. Reimer:

On April 16, you wrote and requested cancellation of Walker Memorial Hospital's pay telephone certificate and requested an application so that you could apply for a new certificate under the name of Adventist Health System/Sunbelt, Inc. d/b/a Florida Hospital Heartland Medical Center. I mailed the application on April 19. As of this date, we do not show where the application has been received. In addition, I did not go ahead and cancel the certificate in the Walker Memorial Hospital name so there would not be a break in service. Since I have not received the new application, I am enclosing another application. When you return the application, please enclose a cover letter and request cancellation of Walker Memorial Hospital's certificate and request that both have the same effective date.

The Commission's Division of Administration notified me that Walker Memorial Hospital has not paid its 1997 and 1998 regulatory assessment fees (RAFs), along with statutory penalty and interest charges from 1991, 1994, 1997, and 1998. The charges are outlined below:

Year	Fee	Penalty	Interest	Notes
1991	Paid	\$5.00	\$1.00	You paid the RAF on 3/18/92, but it was due 1/30/92, thus, the penalty and interest charges apply.
1994	Paid	\$2.50	\$.50	You paid the RAF on 2/20/95, after the due date of 1/30/95.
1997	\$50.00	\$12.50	\$9.00	Payment was due 1/30/98. If your payment is postmarked in July 1999, you will owe \$71.50 for 1997 RAFs. If it is postmarked in August 1999, you will owe \$72.00, since the interest charge continues to increase each month until paid.

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An Affirmative Action/Equal Opportunity Employer

PSC Website: [www.scri.net/psc](http://www.scri.net/psc)

Internet E-mail: [contact@psc.state.fl.us](mailto:contact@psc.state.fl.us)

Mr. Randall Reimer, Controller  
Page 2  
July 20, 1999

Year	Fee	Penalty	Interest	Notes
1998	\$50.00	\$12.50	\$3.00	Payment was due 2/1/99. If your payment is postmarked in July 1999, the amount due is \$65.50. If it is postmarked in August, the amount increases to \$66.00.
Total	\$100.00	\$32.50	\$13.50	Grand Total: \$146.00

Please let me know by August 10 when the past due amount will be paid and when I can expect to receive your application/cancellation request. If you have any questions, just let me know. I can be reached at (850) 413-6502-voice, (850) 413-6503-fax, and by internet e-mail at [pisler@psc.state.fl.us](mailto:pisler@psc.state.fl.us).

Sincerely,



Paula J. Isler, Research Assistant  
Bureau of Service Evaluation & Compliance

Enclosure

c: TMS #4339



**FLORIDA HOSPITAL**

*Heartland Division*

P.O. Box 9400, 4200 Sun 'n Lake Blvd.  
Sebring, FL 33871-9400  
941/314-4466  
941/402-3110 FAX

April 16, 1999

Paula Isler  
State of Florida  
Public Service Commission

Dear Ms. Isler,

Due to the change in our company name and address, I request a cancellation of the certificate in the name of Walker Memorial Hospital.

I understand I need to apply for a new certificate under the name of Adventist Health System/Sunbelt, Inc. d/b/a Florida Hospital Heartland Medical Center. Please send me any applications or forms to make this change.

Sincerely,

Randall Reimer  
Controller

Mailed PATS APP  
4/19



RAF93

CMFNY CODE	COMPANY NAME	REG DATE	INACTIVE DATE	RAF PERIOD ENDING	NO RAF FORM	RAF & COLL FEE PAYMENT AMOUNT	COLL AGENCY FEE	RAF (NO EXTENSION) RECEIVED	POST MARK DATE	DEPOSIT NUMBER	PENALTY DUE 5%/30 DAYS 25% MAX	PENALTY PAID	INTEREST DUE 1%/30 DAY	INTEREST PAID	DATE DELINQNT LETTER MAILED	DATE P & I LETTER MAILED	DAYS OF EXT	EXTENSION AMOUNT @ 79%/18 DA 1.5%/30 DA
TE022	Walker Memorial Ho	24-Mar-89	- -	12-31-93		\$50.00		\$50.00	1-31-84	AUB1								
TE022	Walker Memorial Ho	24-Mar-89	- -	6-30-93		\$50.00		\$50.00	7-30-93	A0788								

RAF92

CMFNY CODE	COMPANY NAME	REG DATE	INACTIVE DATE	RAF PERIOD ENDING	NO RAF FORM	RAF & COLL FEE PAYMENT AMOUNT	COLL AGENCY FEE	RAF (NO EXTENSION) RECEIVED	POST MARK DATE	DEPOSIT NUMBER	PENALTY DUE 5%/30 DAYS 25% MAX	PENALTY PAID	INTEREST DUE 1%/30 DAY	INTEREST PAID	DATE DELINQNT LETTER MAILED	DATE P & I LETTER MAILED	DAYS OF EXT	EXTENSION AMOUNT @ 79%/18 DA 1.5%/30 DA
TE022	Walker Memorial Ho	24-Mar-89	- -	12-31-92		\$50.00		\$50.00	1-7-93	AH593								
TE022	Walker Memorial Ho	24-Mar-89	- -	6-30-92		\$50.00		\$50.00	8-20-92	AA514								

RAF91

CMFNY CODE	COMPANY NAME	REG DATE	INACTIVE DATE	RAF PERIOD ENDING	NO RAF FORM	RAF & COLL FEE PAYMENT AMOUNT	COLL AGENCY FEE	RAF (NO EXTENSION) RECEIVED	POST MARK DATE	DEPOSIT NUMBER	PENALTY DUE 5%/30 DAYS 25% MAX	PENALTY PAID	INTEREST DUE 1%/30 DAY	INTEREST PAID	DATE DELINQNT LETTER MAILED	DATE P & I LETTER MAILED	DAYS OF EXT	EXTENSION AMOUNT @ 79%/18 DA 1.5%/30 DA
TE022	Walker Memorial Ho	24-Mar-89	- -	12-31-91		\$50.00		\$50.00	3-18-92	LC397	\$6.00	\$0.00	\$1.00	\$0.00	2-28-92			

Y7

\*\* Transmit Conf. Report \*\*

Feb 9 '99 17:21

--> 19414023158	
No.	0014
Mode	NORMAL
Time	0'39"
Pages	1 Page(s)
Result	OK

*Walker Memorial Hospital,  
Florida Hospital Heartland  
Medical Center  
Response due 2/26/99*

State of Florida



**Public Service Commission**

**FACSIMILE TRANSMITTAL COVER SHEET**

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DATE: February 9, 1999  
TO: Mr. G. J. Newmyer, Walker Memorial Hospital, (941) 402-3158  
FROM: *PI* Paula Isler, (850) 413-6502-voice; 413-6503-fax; internet address is:  
pisler@psc.state.fl.us  
RE: Pay Telephone Certificate No. 2250

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The Division of Records and Reporting advised me that you had updated your company's address and phone number. On the form, you had marked through Walker Memorial Hospital and written "now called: Florida Hospital Heartland Medical Center."

I checked the Florida Department of State (DOS), Division of Corporations' records and found the fictitious name of Florida Hospital Heartland Medical Center is registered. However, the owner of the fictitious name is listed as Adventist Health System/Sunbelt, Inc. and not Walker Memorial Hospital. I also checked the name of Walker Memorial Hospital under fictitious names and corporations, but could not find that name listed at all.

What this means is that you will have to request cancellation of the certificate in the name of Walker Memorial Hospital and apply for a new certificate under the name of Adventist Health System/Sunbelt, Inc. d/b/a Florida Hospital Heartland Medical Center. We can make the effective date of the cancellation and application the same so that there will be no break in service. Please contact me by February 26, 1999, with the date you plan to file the application. I will send you a new application as soon as I hear from you.

State of Florida



## Public Service Commission

-M-E-M-O-R-A-N-D-U-M-

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**DATE:** April 16, 1998  
**TO:** Rick Moses, Division of Communications  
**FROM:** Nonnye Grant, Division of Records and Reporting *mg*  
**RE:** WALKER MEMORIAL HOSPITAL (TE022)

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Recently mailed out my request for "updated information" from all the Companies/Utilities under the FPSC jurisdiction. The above Company responded with what appears as a name change.

Forwarding copy of my "updated information" for your information and further handling. No docket has been opened requesting a name change. Until that is done and an order issued acknowledging the name change, they will remain under the name that they were certified under.

Thanking you in advance.

/nbg  
Attachments (1)

STATE OF FLORIDA

Commissioners:  
JULIA L. JOHNSON, CHAIRMAN  
J. TERRY DEASON  
SUSAN F. CLARK  
JOE GARCIA  
E. LEON JACOBS, JR.



DIVISION OF RECORDS & REPORTING  
BLANCA S. BAYÓ  
DIRECTOR  
(850) 413-6770

Public Service Commission

March 11, 1998

Mr. G. J. Newmyer  
Walker Memorial Hospital  
P. O. Box 1200  
Avon Park, FL 33825-1200

RECEIVED

MAR 23 1998

FPSC - Records/Reporting

Dear Sir or Madam:

The Commission is reviewing its information on regulated utilities. Please check the information below and note any change(s) on this letter, and return the letter to us within 15 days of receipt. Pursuant to Commission Rule 25-22.005(7), F.A.C., any future changes in this information must be reported to us in writing. Thank you for your cooperation.

*No debt record requesting name change*

sincerely,  
*Blanca S. Bayó*  
Blanca S. Bayó

~~Walker Memorial Hospital~~ NOW CALLED: FLORIDA HOSPITAL  
HEARTLAND MEDICAL CENTER

Location:  
~~Highway 27 North~~  
~~Avon Park, FL 33825~~

~~4200 SUNNYSIDE BLVD.~~  
~~SEBRING, FL 33872~~

Liaison Officer(s):  
G.J. Newmyer, Engineering Manager, (941) ~~453-1311~~ ~~408-7373~~

Mailing Address:  
Mr. G. J. Newmyer  
P. O. Box 1200 ~~9400~~  
~~Avon Park, FL 33825-1200~~  
~~SEBRING, FL 33872-9400~~

FAX No(s): (941) ~~453-0857~~ ~~408-2158~~

Internet e-mail address:

Internet home page address:

FEID Number:

Company Code: TE022

Certificate(s): 2378

Date Completed: 3-18-98

By: *[Signature]*

**Florida Division of Corporations  
Public Access**

**Fic Inquiry Menu:**  
Please select an inquiry type from the list at left, then enter a search key in the field at right. Press **SEARCH** to begin the search.

Inquiry by:  
Compact Fictitious Name  
Actual Owner Name  
Compact Owner Name  
Document Number  
Owners FEI Number  
Owners Document Number  
County - Registrations filed  
Last Week

12/30/98 FICTITIOUS NAME DOCUMENT SCREEN 08:04:53  
SUMMARY FOR FILING: G97196000184 FILED: 07/15/1997  
STATUS: ACTIVE EXPIRES: 12/31/2002  
Current Owners: 0001 County : HIGHLANDS  
Pages in all forms/attachments: 0001 Events filed: 0000  
Name **FLORIDA HOSPITAL HEARTLAND MEDICAL CENTER**  
FEI: 59-0725553  
Addr 4200 SUN 'N LAKE BOULEVARD

**Search String:**

SEBRING, FL 33872  
1) **OWNER ADVENTIST HEALTH SYSTEM SUNBELT INC**

111 NORTH ORLANDO AVE Charter #: 726307  
WINTER PARK, FL 32789-3675 Fei #: 59-1479658

**Search**

HomePage

Summary

----- THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT -----

\*\* NO HISTORY \*\*

Document Image



