

Alternative Local Exchange Company Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:

01/01/2000 TO
12/31/2000

TX328 01 JAN 25 AM 8:30
Talk Solutions
P. O. Box 28129 MAIL ROOM
Atlanta, GA 30308-0129 DATE
DO NOT JAN 26 2001

FOR PSC USE ONLY
Check# 1297
\$ 50.00 0603006
003001
\$ P 0603006
004011
Postmark Date 1/19/01
Initials of Preparer MR

Please Complete Below If Official Mailing Address Has Changed

TALK SOLUTIONS, INC. (Name of Company) 2000 Newpoint Place Parkway, Ste 900 (Address) Lawrenceville, GA 30043 (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Basic Local Services	\$	\$
2.	Long Distance Services (IntraLATA only)**		
3.	Access Services		
4.	Private Line Services		
5.	Leased Facilities & Circuits Services		
6.	Miscellaneous Services		
7.	TOTAL REVENUES		
8.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)		
9.	Net Intrastate Operating Revenue for Regulatory Assessment Fee Calculation (Line 7 less Line 8)		
10.	Regulatory Assessment Fee Due (Multiply Line 9 by 0.0015)		
11.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)		
12.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)		
13.	TOTAL AMOUNT DUE		\$ 50.00

NO OPERATIONS
None

- * These amounts must be intrastate only and must be verifiable.
- ** Other long distance revenue must be listed on the Interexchange Regulatory Assessment Fee Return.

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

CURRENT COMPANY STATUS
 Facilities-Based Provider
 Reseller
 Other:

BILLING INFORMATION
 Complete below if billing agent if other than yourself.
 (Name) (Address: City/State/Zip) (Telephone)
REDACTED

NOW COMMUNICATIONS, INC. 7-98
 711 S. TEJON, STE. 201 PH. 719-633-3059
 COLORADO SPRINGS, CO 80903
 82-346/1070 10202428 1297
 ORDER 19 for 01
 Pay to the order of FL PSC \$ 50.00
 LIFEY & NICO
 BANK of BROADMOOR
 155 LAKE AVENUE (719) 633-2666
 581 SOUTH TEJON
 COLORADO SPRINGS, CO 80906
 Talk Solutions TX 328

DOCUMENT NUMBER-DATE
 199 JAN 26 2001
 125 19 for 01 (Date)
 159 Fax Number (719) 623 0287
 77
 001-184

PSC-RECORDS/REPORTING

RJR

Alternative Local Exchange Company Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
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TX328 01 JAN 25 AM 8:30
 Talk Solutions
 P. O. Box 28129 MAIL ROOM
 Atlanta, GA 30388-0129 DATE
 DO11 JAN 26 2001

FOR PSC USE ONLY
 Check # 1297
 \$ 50.00 0603006 003001
 \$ 0603006 004011
 Postmark Date 1/19/01
 Initials of Preparer [Signature]

PERIOD COVERED:

01/01/2000 TO
 12/31/2000

Please Complete Below If Official Mailing Address Has Changed

TALK SOLUTIONS, INC. (Name of Company) 2000 Newpoint Place Parkway, Ste 900 Lawrenceville, GA 30043 (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Basic Local Services	\$	\$
2.	Long Distance Services (IntraLATA only)**	\$	\$
3.	Access Services	\$	\$
4.	Private Line Services	\$	\$
5.	Leased Facilities & Circuits Services	\$	\$
6.	Miscellaneous Services	\$	\$
7.	TOTAL REVENUES	\$	\$
8.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	\$	\$
9.	Net Intrastate Operating Revenue for Regulatory Assessment Fee Calculation (Line 7 less Line 8)	\$	\$
10.	Regulatory Assessment Fee Due (Multiply Line 9 by 0.0015)	\$	\$
11.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	\$	\$
12.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	\$	\$
13.	TOTAL AMOUNT DUE	\$	\$ 50.00

NO OPERATIONS

None

* These amounts must be intrastate only and must be verifiable.
 ** Other long distance revenue must be listed on the Interexchange Regulatory Assessment Fee Return.

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

CURRENT COMPANY STATUS
 Facilities-Based Provider
 Reseller
 Other:

BILLING INFORMATION
 Complete below if billing agent if other than yourself.
 (Name) (Address: City/State/Zip) (Telephone)

COMPANY INFORMATION
 Do you lease telecommunications facilities? YES NO
 If YES, who do you lease these facilities from? Name: _____
 Address: _____

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to the 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/her duty shall be guilty of a misdemeanor of the second degree.

R. Scott Seab (Signature of Company Official) VP-Regulatory Affairs (Title) 1/19/01 (Date)
 R. SCOTT SEAB (Preparer of Form - Please Print Name) Telephone Number (719) 623-3057 Fax Number (719) 623-0287
 F.E.I. No. 58-2210377
 CANCELLED ALEC 1/2/01
 DOCKET 001484

Alternative Local Exchange Company Regulatory Assessment Fee Return

Classified as: Project Management Solutions, Inc dba

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return

TX328 01 JAN 25 AM 8:30
 Talk Solutions
 P. O. Box 28129 MAIL ROOM 001484
 Atlanta, GA 30358-0129 DATE
DO 11 JAN 26 2001

FOR PSC USE ONLY
 Check # 1297
 \$ 50.00 0603006
 003001
 \$ P
 0603006
 004011
 Postmark Date 1/19/01
 Initials of Preparer MAC

PERIOD COVERED:

01/01/2000 TO
12/31/2000

Please Complete Below If Official Mailing Address Has Changed

TALK SOLUTIONS, INC.
(Name of Company)

2000 Newpoint Place Parkway, Ste 900
(Address)

Lawrenceville, GA 30043
(City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Basic Local Services <i>Old M/ P O Box 28129</i>	\$	\$
2.	Long Distance Services (IntraLATA only)** <i>Atlanta, Ga 30358-0129</i>	\$	\$
3.	Access Services	\$	\$
4.	Private Line Services <i>46075 Rawell Road, Suite 319</i>	\$	\$
5.	Leased Facilities & Circuits Services <i>Atlanta, GA 30358-0129</i>	\$	\$
6.	Miscellaneous Services <i>John T. Schneider, Regulatory Manager</i>	\$	\$
7.	TOTAL REVENUES <i>P-404) 252-7466</i>	\$	\$
8.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	\$	\$
9.	Net Intrastate Operating Revenue for Regulatory Assessment Fee Calculation (Line 7 less Line 8)	\$	\$
10.	Regulatory Assessment Fee Due (Multiply Line 9 by 0.0015)	\$	\$
11.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	\$	\$
12.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	\$	\$
13.	TOTAL AMOUNT DUE	\$	\$ <u>50.00</u>

NO OPERATIONS

Nonfile

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 ** Other long distance revenue must be listed on the Interexchange Regulatory Assessment Fee Return.

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

CURRENT COMPANY STATUS

() Facilities-Based Provider
 (X) Reseller
 Other: Cancel - BC - ALEC Cmts - violation - late 254,000/0 PSC PAR
1-23-01 - PSC - 01-0207 - PAA BILLING INFORMATION
- Tx - Cancels cut off when CO is issued

Complete below if billing agent if other than yourself.

(Name) (Address: City/State/Zip) (Telephone)

COMPANY INFORMATION

Do you lease telecommunications' facilities? () YES (X) NO
 If YES, who do you lease these facilities from? Name:

Address:

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to the 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/her duty shall be guilty of a misdemeanor of the second degree.

R. Scott Seab
(Signature of Company Official)

VP - Regulatory Affairs 19 Jan 01
(Title) (Date)

R. SCOTT SEAB
(Preparer of Form - Please Print Name)

Telephone Number (719) 6333057 Fax Number (719) 6230287

F.E.I. No. 58-2210377

*CANCELLED ALEC 1/2/01
DOCKET 001484*