



Public Service Commission

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

DATE: April 9, 2001

TO: Blanco Bayo, Director, Division of Records and Reporting

FROM: Toni J. McCoy, Regulatory Analyst, Division of Regulatory Oversight

SUBJECT: Open Docket No. 010327-TC; Treasure Coast Payphone, Inc.

Please add the attached correspondence to the docket file.

Call me if you have any questions, I can be reached at 850/413-6532.

Thank you.

APP _____
 CAF _____
 CMP _____
 COM _____
 CTR _____
 ECR _____
 LEG _____
 OPC _____
 PAI _____
 RGO _____
 SEC _____
 SER _____
 TCH _____

DOCUMENT NUMBER-DATE

04403 APR 10 2001

FPSC-RECORDS/REPORTING

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

March 27, 2001

Mr. Joseph E. Pierce
Treasure Coast Payphone, Inc.
6861 S.E. Harbor Court
Stuart, FL 34996-1970

RE: 2001 Regulatory Assessment Fee Form
Cancellation of Pay Telephone Certification No. 4292
Docket No. 010327-TC

Dear Mr. Pierce:

Enclosed is the 2001 Regulatory Assessment Fee Form. Please complete the form and enclose the \$50 minimum fee due for 2001. In your cover letter, reference the above docket number and my name, so I will be copied on the correspondence. Once the 2001 fee has been paid, I will process Certificate No. 4292 for cancellation effective March 15, 2001, which is the date your original cancellation request was received by the Commission. Make the check payable to the Florida Public Service Commission and mail it with the form to:

Florida Public Service Commission
Attention: Fiscal Services
2540 Shumard Oak Blvd.
Tallahassee, FL 32399-0850

I recommend that you make a copy of the correspondence for your files. If you have any questions, please feel free call me at 850/413-6532.

Sincerely,

A handwritten signature in black ink that reads "Toni J. McCoy".

Toni J. McCoy
Regulatory Analyst/Certification
Division of Regulatory Oversight

Enclosure

Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
01/01/2001 TO 12/31/2001

J. McCoy-RGO
RJR

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

TF792 01 APR -2 AM 11:40
 Treasure Coast Payphone, Inc.
 6861 S.E. Harbor Court
 Stuart, FL 34996-1970
 DEPOSIT DATE
 D051 APR 04 2001

FOR PSC USE ONLY
 Check# 1505
 \$ 50.00
 0603002
 003001
 P
 0603002
 004011
 I
 Postmark Date 3/30/01
 Initials of Preparer MC

Please Complete Below If Official Mailing Address Has Changed

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

LINE NO.	ACCOUNT CLASSIFICATION	APR 04 2001	AMOUNT
1.	Gross Operating Revenue (Florida)	Florida Public Service Commission Division of Regulatory Oversight	\$ 790.85
2.	Gross Intrastate Revenue		790.85
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)		()
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)		\$ 790.85
5.	Regulatory Assessment Fee Due — (Multiply Line 4 by 0.0015)		. 1.19
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)		
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)		
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

TREASURE COAST PAYPHONE INC.

1505
83-615/870

DATE 3/30/01

PAY TO THE ORDER OF Florida Public Service Comm

fifty \$ 50.00

00 DOLLARS

First National
BANK AND TRUST COMPANY
THE SUPERCOMMUNITY BANK
STUART, FLORIDA 34997

FOR 2001 Regulatory Assessment Fee Joseph R. Lee

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
 01/01/2001 TO 12/31/2001

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

TF792
 Treasure Coast Payphone, Inc.
 6861 S.E. Harbor Court
 Stuart, FL 34996-1970

Please Complete Below If Official Mailing Address Has Changed

FOR PSC USE ONLY	
Check#	_____
\$	0603002
	003001
\$	P
	0603002
	004011
\$	I
Postmark Date	_____
Initials of Preparer	_____

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

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ <u>790.85</u>
2.	Gross Intrastate Revenue	<u>790.85</u>
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	()
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ <u>790.85</u>
5.	Regulatory Assessment Fee Due — (Multiply Line 4 by 0.0015)	<u>1.19</u>
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	<u>—</u>
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	<u>—</u>
8.	TOTAL AMOUNT DUE	\$ <u>50.00</u>

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 zero

* These amounts must be intrastate only and must be verifiable.

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 official duty shall be guilty of a misdemeanor of the second degree.

Joseph S. Klein
 (Signature of Company Official)

Sec/Treas
 (Title) 3/30/07
 (Date)

Telephone Number 861.225-8170 Fax Number 861.225-6185

(Preparer of Form - Please Print Name)

F.E.I. No. 65-0597502