

ORIGINAL

Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS:

RJR

Florida Public Service Commission

(See Filing Instructions on Back of Form)

- Actual Return
- Estimated Return
- Amended Return

TE674 01 APR 23 AM 9:52
 Atlantic Gulf Enterprises
 3789 46th Avenue South, Penthouse 303
 St. Petersburg, FL 33711-0401
DEPOSIT DATE
D060 APR 24 2001

FOR PSC USE ONLY
 Check# 5299
 \$ 50.00 0603002
 \$ 7.50 003001
 \$ 1.50 P
 0603002
 004011
 Postmark Date 4/19/01
 Initials of Preparer mc

PERIOD COVERED:

01/01/2000 TO
 12/31/2000

Please Complete Below If Official Mailing Address Has Changed

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

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ <u>1440.89</u>
2.	Gross Intrastate Revenue	<u>1404.60</u>
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	<u>(804.00)</u>
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ <u>600.60</u>
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0015)	<u>50.00 (min.)</u>
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	<u>7.50</u>
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	<u>1.50</u>
8.	TOTAL AMOUNT DUE	\$ <u>59.00</u>

- APP _____
- CAF _____
- CMP _____
- COM _____
- CTR _____
- ECR _____
- LEG
- OPC _____
- PAI _____
- RGO _____
- SEC
- SEF _____
- OTH _____

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 2

* 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.

Alan O. Long Jr.
 (Signature of Company Official)
Glenn Renner Jr.
 (Preparer of Form - Please Print Name)

owner (Title) 4/18/01 (Date)
 Telephone Number () Fax Number (813) 936-5269

F.E.I. No. _____
 DOCUMENT NO.
0509301
4/24/01

Florida Public Service Commission
Ms. Blanca Bayo, Director
Division of Records and Reporting
2540 Shumard Oak Blvd.
Tallahassee, Florida 32399-0850

April 19, 2001

Reference: Docket #010429-TC

Dear Commissioners:

This is the first time that we have failed to file of time the RAF. Please accept our apologies.

We have relocated offices and have taken the following steps to prevent future late payments of regulatory assessment. The form has been assigned as a job description for the office manager plus she must notify me by memo that this form was completed and mailed annually by the 15th of January. This memo must be sent to me by January 16th.

Please accept this a waiver of objection to the administrative cancellation of our certificate in the event our offer is accepted and we fail to comply with the terms, which we have offered.

Also, please accept our offer of a monetary settlement in the amount of \$100.00.

Attached to this letter is the past due 2001 RAF form plus a check for the minimum \$50.00 fee with the penalty and interest charges totally \$59.00

Any you have any further question, please contact me at 813-936-5259.

Thank you so much for your cooperation in this matter.

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

Sincerely,



Glenn W. Renegar Jr.
Owner

DOCUMENT NUMBER-DATE

05093 APR 24 01

FPSC-RECORDS/REPORTING