TO AVOID PENALTY AND INTREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 1/30/01 Interexchange Company Regulatory Assessment Fee Return ORIGINAL

STATUS: PIL	Florida Public Service Commission (See Filing Instructions on Back of Form)	FOR PSC USE ONLY Check # 02007983
Estimated Return Amended Return PERIOD COVERED Jan. 1, 2001 - Dec. 31, 2001	TI064-00-0-R         PTC Services         10120 Windhorst Road         DEPOSIT       DATE         Tampa, FL 33619-782         D 1 3 1       CCT 2 2 2001         Docket #010860-TI	$\frac{s 50.00}{s} \frac{0603001}{003001}$ $\frac{s}{0603001}$ $\frac{9}{0603001}$ $\frac{0603001}{004011}$ $\frac{1}{004011}$ $\frac{1}{1}$ Postmark Date /0/17/0/

## Please Complete Below If Official Mailing Address Has Changed

	(Name of Company)	(Address)	(Ci	(City/State)	
LINE NO.	ACCOUNT CLASSIFICATION		ORIDA ATING REVENUE	INTRA	ASTATE REVENUE
1. 2.	Long Distance Services Access Services	s	0.00	\$	0.00
3. 4.	Private Line Services Leased Facilities & Circuits Services		0.00		0.00
5. 6.	Miscellaneous Services TOTAL Telephone Services	\$	0.00	s	0.00
7.	LESS: Amounts Paid To Other Telecommunications Companies* (see "2. Fees" on back)	(	)	(	0.00 )
8. 9.	TOTAL REVENUES For Regulatory Assessment Fee Calculati Regulatory Assessment Fee Due (Multiply Line 8 by 0.0015)			s	0.00 50.00
10.	Penalty for Late Payment (see"3. Failure to file by Due Date" o back)				
11.	Interest for Late Payment (see"3. Failure to file by Due Date" o back)	n 		·	
12.	TOTAL AMOUNT DUE			5	50.00

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

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

		CURREN	T COMPANY	STATUS			
() Facilities-Based Carrier	(X)Rese			) Call Aggrega	tor		
( ) Alternative-Operator Service	() Rebil	ler	(	) Other:			
······································		BILLI	NG INFORM	ATION		· · · · · · · · · · · · · · · · · · ·	
Complete below if billing agent if other that	n yourself.						
(Name)			(Address:	City/State/Zip)			(Telephone)
What is the total amount of customer depos	its collected?				What is the tota	d amount of	bond held (if applicable)?
Amount: <u>\$-0-</u> for <u>2000</u>					Amount:	N/A	Expires:
		COMP	ANY INFORM	ATION			· · · · · · · · · · · · · · · · · · ·
Do you lease telecommunications facilities	?	(X)YES	( ) NO				
APP	Name:	MCI/Worldc	om				
CAF Address:	•						
СМР							
COM							
I, the undersigned owner/officer of the second seco		*		00000	T1 11 04 4 4		las and the design of the factors of the factors
5 Statement in writing with the intent to $d$	slead a publi	c servant in the	erformance of	his/her duty sha	all be guilty of a	misdemeand	or of the second degree.
MARCALLAND / 11	n	1	1.50				alajala
OPC Mar pro		4	CFO	TREA	super		120101
CAI (Signature of Company C	micial)			, (1	itle)		(Dalt)
RGØ Lisa Bilchik	DOCUME	NT NUMBER	- DATElepho	ne Number: 6	100-33	0-354	15 EXt. 328
SER (Preparer of Form-Please Pr	int Name)						
)Thh	13:	339 OCT	19 = F.E.I.N	p. <u>10    </u>	- 26263	45-	
	•		-				
	FPSC-C	DHINSSION	CLERK				

to avoid penalty and intrest charges, the regulatory assessment fee return must be filed on or before 1/3001 Interexchange Company Regulatory Assessment Fee Return

	/	
STATUS:		FOR PSC USE ONLY Check # 0200 798/
Estimated Return	TI064-00-0-R	
Amended Return PERIOD COVERED	PTC Services 10120 Windhorst Road DEPOSIT DATE	$\frac{5000}{12.50}$ $\frac{00000}{000000}$
Jan. 1, 2000 -	Tampa, FL 33619-7829 1 3 1 5 CCT 2 2 2001	s 4.50 1 004011
Dec. 31, 2000	Docket #010860-TI	Postmark Date 10/17/0/
	Please Complete Below If Official Mailing Address Has Changed	Initials of Preparer

Please Complete Below If Official Mailing Address Has Changed

	(Name of Company)	(Address)	(C	ity/Sta	ate) (Zip)
<u>LINE NO.</u>	ACCOUNT CLASSIFICATION		RIDA FING REVENUE		INTRASTATE REVENUE
1. 2.	Long Distance Services Access Services	· \$	0.00	\$	0.00
3. 4. 5.	Private Line Services Leased Facilities & Circuits Services Miscellaneous Services		0.00		0.00
6. 7.	TOTAL Telephone Services LESS: Amounts Paid To Other	\$	0.00	s	0.00
7. 8.	Telecommunications Companies* (see "2. Fees" on back) TOTAL REVENUES For Regulatory Assessment Fee Calculati	(	)	(,	0.00 )
9. 10.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0015) Penalty for Late Payment (see"3. Failure to file by Due Date" o			s _	50.00
	back)				12.50
11.	Interest for Late Payment (see"3. Failure to file by Due Date" o. back)	n			4.50
12.	TOTAL AMOUNT DUE			\$ _	67.00

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

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

		CURRENT COMPANY ST.	TATUS			
() Facilities-Based Carrier	(X) Res	• •	Call Aggregato	r		
() Alternative-Operator Service	( ) Rebil	()(	Other:	·····		
		BILLING INFORMATIC	ON			
Complete below if billing agent if other than	yourself.					
(Name)		(Address: Cit	ty/State/Zip)	· · · · · · · · · · · · · · · · · · ·		(Telephone)
What is the total amount of customer deposits	collected?			What is the total		ond held (if applicable)?
Amount: <u>\$-0-</u> for 2000	_			Amount:	N/A	Expires:
		COMPANY INFORMAT	TION			
Do you lease telecommunications facilities?		(X)YES ()NO				
If YES, who do you lease facilities from:	Name:	MCI/Worldcom				
Address:				<u></u>	· · · · · · · · · · · · · · · · · · ·	
					······	
I, the undersigned owner/officer of the	above-nan	ed company, have read the foregoi	ing and decla	re that to the b	est of my kr	nowledge and belief, the
above information is a true and correct s	tatement.	I am aware that pursuant to Secti-	ion 837.06, F	lorida Statutes,	whoever k	nowingly makes a false
statement in writing with the intent to misle	eas a publi	c servant in the performance of his/h	her duty shall	be guilty of a n	nisdemeanor	r of the second degree.
1 your > L	und	in CFO	TRE	osu.Re	1	09/28/
(Signature of Company Off	icial)	<u> </u>	(Title	e)		(Date)
Lisa Bilchik		Telephone N	lumbar: Q	00-33	6-25	115
(Preparer of Form-Please Print	Name)					
	· · ·····	F.E.I.No.	13-	2626	<u>345</u>	
PSC/CMU1153 (Pay 11/11/00)						**

October 17, 2001 Via Overnight Delivery



210 N. Park Ave. Winter Park, FL 32789	Ms. Blanca S. Bayo Director, Division of Records and Reporting Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, Florida 32399-0850					
PO. Drawer 200						
Winter Park, FL	Vinter Park, FL Attn:	Fiscal Services				
32790-0200	Re:	Peoples Telephone Company, Inc. d/b/a PTC Services (TI064) Cancellation of Certificate No. 2995 - Resold Interexchange Services				
Tel: 407-740-8575		Docket No. 010860-TI				
Fax: 407-740-0613	Dear N	Ms. Bayo:				
tmi@tminc.com	Deal	vis. Dayo.				
	Enclos	sed are the 2000 and 2001 Regulatory Assessment fee forms of Peoples Telephone				

Company, Inc. d/b/a PTC Services, along with two checks for \$67.00 and \$50.00, respectively, to cover the required payments for each year, including penalties and interest for 2000. Also enclosed for filing are the original and five (5) copies of this letter to advise the

Commission that Peoples Telephone Company, Inc. d/b/a PTC Services ("PTC") is hereby requesting cancellation of its Certificate of Public Convenience and Necessity (Certificate No. 2995) to provide resold interexchange telecommunications in the state of Florida.

The Company no longer operates in Florida, and has no future plans to do so. Therefore, PTC wishes to cancel the above-referenced certificate. No customers will be affected by this cancellation as the Company has no customers in Florida.

Please acknowledge receipt of this filing by date-stamping the extra copy of this cover letter and returning it to me in the self-addressed, stamped envelope provided for this purpose.

Any questions regarding this filing may be directed to my attention at (407) 740-8575.

Sincerely,

Kobin Norton

Robin Norton Consultant to Peoples

*RN:mw* Enclosure

cc:	Lisa Bilchik
file:	TERETENEDKELED
tms:	FLi0101
	XLL
	FRSC-BUREAU OF RECORDS

DOCUMENT NUMBER-DATE