

ORIGINAL

Pay Telephone Service Provider Regulatory Assessment Fee Return

2001 + 2002 pymt

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

STATUS:

P. Isler
PICA

- Actual Return
- Estimated Return
- Amended Return

TE767-01-0-R
 Quarter Time Communications *undocked*
 3445 Scrimshaw Drive
 Jacksonville, FL 32257-6322

FOR PSC USE ONLY
 Check# 5171 + 5174
 \$ 100.50 0603002
 \$ 12.50 P 003001
 \$ 3.00 0603002
 004011
 Postmark Date 7/13/02
 Initials of Preparer MC

PERIOD COVERED:

01/01/2001 TO 12/31/2001

DEPOSIT

DATE CC: P. Isler

Please Complete Below If Official Mailing Address Has Changed

0232 JUL 17 2002
 Quarter Time Communications 3445 Scrimshaw Dr JAX, FL 32257
 (Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ <u>0</u>
2.	Gross Intrastate Revenue	<u>0</u>
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	(<u>0</u>)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ <u>0</u>
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0015)	<u>50</u>
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back) <i>#50 x 25% = #12.50</i>	<u>12.50</u>
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back) <i>#50 x 7% = #3.50</i>	<u>3.50</u>
8.	TOTAL AMOUNT DUE	\$ <u>66.00</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 0

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

CANCEL CERTIFICATE ASAP! By 12/31/2002

CAF
 CMP
 COMI, 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.

GCL David L. Bewley
OPC (Signature of Company Official)

President
(Title) 7/9/2002
(Date)

MMS DAVID L. BEWLEY
SEC (Preparer of Form - Please Print Name)

Telephone Number (704) 464-6609 Fax Number ()

OTH

F.E.I. No.

DOCUMENT NUMBER-DATE

07447 JUL 17 02