

(030000)

Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS:

- Actual Return
- Estimated Return
- Amended Return

*P. Isler  
JACA*

Florida Public Service Commission

(See Filing Instructions on Back of Form)

TG901-02-0-R  
Country Quick Stop  
869 South Main Street  
Bell, FL 32619-5213

ORIGINAL

**DEPOSIT**

DATE <sup>3</sup>  
JAN 03 2003

0285

PERIOD COVERED:  
09/16/2002 TO 12/31/2002

**FOR PSC USE ONLY**

Check# 1142

\$ 50.00 0603002  
003001

\$ \_\_\_\_\_ P 0603002  
004011

\$ \_\_\_\_\_ 1

Postmark Date 12/30/02

Initials of Preparer MC

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)	\$ 0.00
2.	Gross Intrastate Revenue	0.00
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	( 0.00 )
4.	<b>TOTAL REVENUES for Regulatory Assessment Fee Calculation</b> (Line 2 less Line 3)	\$ 0.00
5.	Regulatory Assessment Fee Due – (Multiply Line 4 by 0.0015)	0.00
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	0.00
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	0.00
8.	<b>TOTAL AMOUNT DUE</b> Minimum *	\$ 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

9. Number of pay telephones in operation at close of period covered by this Return 0

\* Note: Phone is not in service.

\* 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.

Signature of Company Official: J. Patel

Title: President Date: 12/30/02

Preparer of Form - Please Print Name: JAYANT. R. PATEL

Telephone Number: 352 463 7478 Fax Number: 352 935-121

- ECR \_\_\_\_\_
- GCL \_\_\_\_\_
- OPC \_\_\_\_\_
- MMS \_\_\_\_\_
- SEC I
- OTH \_\_\_\_\_

F.E.I. No. 59-3518757

DOCUMENT NUMBER DATE

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