

Pay Telephone Service Provider Regulatory Assessment Fee Return

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

STATUS:
 Actual Return
 Estimated Return
 Amended Return

*P. Isler
 PCA*

TF484-02-0-R
 A.B.C. Pay Phones of Florida
 P. O. Box 716
 Milton, FL 32572-0716
DEPOSIT DATE
 D 357 JUN 17 2003
 cc: P. Isler

FOR PSC USE ONLY
 Check# 9012
 \$ 131.91 0603002
 \$ 32.98 003001
 \$ 3.04 0603002
 I 004011
 Postmark Date 6/12/03
 Initials of Preparer MC

Please Complete Below If Official Mailing Address Has Changed

(Name of Company)

(Address)

(City/State)

(Zip)

LINE NO. ACCOUNT CLASSIFICATION

1. Gross Operating Revenue (Florida)
2. Gross Intrastate Revenue
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)
5. Regulatory Assessment Fee Due – (Multiply Line 4 by 0.0015)
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**

	AMOUNT
AUS	
CAF	\$ 135,009.94
CMP	
COM	134,095.24
CTR	
ECR	(46,541.0)
GCL	
OPC	
MMS	
SEC	\$ 87,941.4
OTH	
	131.91
	145.13
	435
	late fee 1845 past due
	\$ 167.93

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 121

* 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]
 (Signature of Company Official)

President 6/10/03
 (Title) (Date)

Peagu A Brown
 (Preparer of Form - Please Print Name)

Telephone Number 850 981-0100 Fax Number 850 981-0530

F.E.I. No. 593652785

DOCUMENT NUMBER DATE

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