

ORIGINAL

Pay Telephone Service Provider Regulatory Assessment Fee Return

1998 P+I, 2000 P+I and 2003 R.A.F.
 Florida Public Service Commission
 (See Filing Instructions on Back of Form)

STATUS:

*P. Isler
 CCA*

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
 01/01/2003 TO 12/31/2003

TF800-03-0-R
 The Moors Golf Club
 3220 Avalon Blvd.
 Milton, FL 32583-5574
 DEPOSIT DATE
 D 3 8 0 SEP 0 4 2003
 cc: P. Isler

FOR PSC USE ONLY
 Check# 4012
 \$ 50.00 0603002
 \$ 5.00 003001
 \$ 1.00 0603002
 004011
 Postmark Date 8/30/03
 Initials of Preparer MC

Please Complete Below If Official Mailing Address Has Changed

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

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
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	\$ _____

- AUS _____
- CAF _____
- CMP _____
- COM _____
- CTR _____
- ECR _____
- GCL _____
- OPC _____
- MMS _____
- SEC 1
- 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 0

* 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.

Mickey Smith
 (Signature of Company Official)

DIRECTOR OF GOLF 8/29/03
 (Title) (Date)

MICKEY SMITH
 (Preparer of Form - Please Print Name)

Telephone Number (850) 995-4653 Fax Number (850) 994-7040
 F.E.I. No. 59-3347129

DOCUMENT NUMBER-DATE

08230 SEP-4 03

FPSC-COMMISSION CLERK