

# Pay Telephone Service Provider Regulatory Assessment Fee Return

**ORIGINAL** 040084-K

Florida Public Service Commission

(See Filing Instructions on Back of Form)

US:

- Actual Return
- Estimated Return
- Amended Return

TG480-03-0-R  
 TRM Communications  
 201 Nassau Lakes Circle  
 Fernandina Beach, FL 32034-7052

CC: P. Isler

FOR PSC USE ONLY	
Check#	1260
\$	50.00
	0603002
	003001
	P
	0603002
	004011
	I
Postmark Date	1-25-04
Initials of Preparer	RF

OD COVERED:  
1/2003 TO 12/31/2003

*ula*  
*wards*

Please Complete Below If Official Mailing Address Has Changed

(Name of Company)

(Address)

(City/State)

(Zip)

## ACCOUNT CLASSIFICATION

## AMOUNT

Gross Operating Revenue (Florida)

\$ 0

Gross Intrastate Revenue

0

LESS: Amounts Paid to Other Telecommunications Companies\*  
(see "2. Fees" on back)

AUS \_\_\_\_\_ ( )  
CAF \_\_\_\_\_

**TOTAL REVENUES for Regulatory Assessment Fee Calculation**  
(Line 2 less Line 3)

CMP \_\_\_\_\_  
COM \_\_\_\_\_

Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0015)

CTR \_\_\_\_\_ \$ 0  
ECR \_\_\_\_\_

Penalty for Late Payment (see "3. Failure to File by Due Date" on back)

GCL \_\_\_\_\_  
OPC \_\_\_\_\_

Interest for Late Payment (see "3. Failure to File by Due Date" on back)

MMS \_\_\_\_\_  
SEC \_\_\_\_\_

**TOTAL AMOUNT DUE**

OTH \_\_\_\_\_  
\_\_\_\_\_

\$ 0

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**

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

0

*Company closed 12/31/02. Please cancel certificate for  
2004 and beyond.*

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.

*Timothy R. McVeigh*  
(Signature of Company Official)

owner (Title) 1/17/04 (Date)

Timothy R. McVEIGH  
(Preparer of Form - Please Print Name)

Telephone Number (904) 261-8360 Fax Number (904) 261-9387

F.E.I. No. \_\_\_\_\_

01323 JAN 29 3

FPSC-COMMISSION CLERK