| Date: | 9/1/2004 | | Docket No.: | 041019-TC | | |
|------------|--|---|---------------|---|--|--|
| 1. Divisio | 1. Division Name/Staff Name: Division Of Competitive Markets & Enforcement/Isler | | | | | |
| 2. OPR: | Division Of Competitiv | e Markets & Enforcement | | | | |
| 3. OCR: | Office Of The Genera | Counsel | | | | |
| 4. Sugge | vi | | | n Williams d/b/a Visions Vending for apparent atory Assessment Fees; Telecommunications | | |
| А. В. | Provide NAMES OR A | List (attach separate she ACRONYMS ONLY if a reg NAME AND ADDRESS for epresentatives (if any): | ulated compar | | | |
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| | | | | | | |
| | 2. Interested person | s and their representative | es (if any): | | | |
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| | | | | | | |
| 6. Chec | k one: | | | | | |
| | ⊠ Document | ation is attached. | | | | |
| | _ | | | | | |
| | Document | ation will be provided with | n recommenda | tion. | | |
| | | | | DOCUMENT NUMBER-DATE | | |
| have | | | | 09618 SEP-23 | | |

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FPSC-COMMISSION CLERK

Commissioners: Braulio L. Baez, Chairman J. Terry Deason Lila A. Jaber Rudolph "Rudy" Bradley Charles M. Davidson

STATE OF FLORIDA



DIVISION OF COMPETITIVE MARKETS & ENFORCEMENT BETH W. SALAK DIRECTOR (850) 413-6600

Hublic Service Commission

May 26, 2004

Mr. Ronnie P. Williams, Owner Visions Vending (TF299) 8232 Northpointe Blvd. Pensacola, FL 32514-6545

Dear Mr. Williams:

The Regulatory Assessment Fee (RAF) is due by January 30th of each year for the preceding calendar year. For certificate holders, the RAF is owed even if a telecommunications company may not have started operations or had any revenues. Since payment has not been made, statutory penalty and interest charges are now applicable.

Our records show that the 2003 RAF return notice was mailed on December 12, 2003, and a delinquent notice was mailed on February 20, 2004. As of this date, our records do not show receipt of the RAF return or payment. A copy of the 2003 RAF return form is enclosed. If full payment, including penalty and interest charges, along with the RAF return form, are not received by June 25, 2004, a docket may be established. Since this will be the second time a docket is established for the same rule violation, staff intends to recommend that your company be fined or its certificate cancelled if you do not respond. Please note that once a docket has been established, just paying the delinquent RAF amount will not prevent your certificate from being cancelled.

If you wish to cancel your certificate voluntarily and leave in good standing with the Commission, your company should pay the past due amount in full, complete the 2003 RAF return form, either pay the 2004 RAF or provide a date certain it will be paid, and comply with the requirements of Rule 25-24.514, Florida Administrative Code, copy enclosed. Any unpaid RAFs, including penalty and interest charges, are turned over to collections. When returning payment and a copy of the completed 2003 Regulatory Assessment Fee return form, please use the enclosed blue envelope, which will insure prompt processing.

If you have any questions, please contact me at (850) 413-6502, by fax at (850) 413-6503, by e-mail at pisler@psc.state.fl.us, or by writing to me at the address below.

Sincerely,

Paula Q. Selu

Paula J. Isler, Research Assistant Bureau of Service Quality

Enclosures TMS #1331

Internet E-mail: contact@psc.state.fl.us

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/2004

Pay Telephone Service Provider Regulatory Assessment Fee Return

| STATUS: | Florida Public Service Commission (See Filing Instructions on Back of Form) | FOR PSC USE ONLY Check# |
|---|--|---|
| Actual Return Estimated Return Amended Return | TF299-03-0-R Visions Vending 8232 Northpointe Blvd. | \$ 0603002 003001 \$ P 0603002 |
| PERIOD COVERED: 01/01/2003 TO 12/31/2003 | Pensacola, FL 32514-6545 CC: P. Isler | 004011 S I Postmark Date Initials of Preparer |

Please Complete Below If Official Mailing Address Has Changed

| | (Name of Company) | (Address) | (City/State) | (Zip) |
|--------------------|--|--|-------------------|-------|
| LINE <u>NO.</u> | ACCOUNT C | LASSIFICATION | AMOL | JNT |
| 1. | Gross Operating Revenue (Florida) |) | \$ | |
| 2. | Gross Intrastate Revenue | | | |
| 3. | LESS: Amounts Paid to Other Tel (see "2. Fees" on back) | ecommunications Companies* | (|) |
| 4. | TOTAL REVENUES for Regula (Line 2 less Line 3) | tory Assessment Fee Calculation | ¢ | |
| 5. | Regulatory Assessment Fee Due – | (Multiply Line 4 by 0.0015) | | |
| 6. | Penalty for Late Payment (see "3. I | Failure to File by Due Date" on back) | | |
| 7. | Interest for Late Payment (see "3.1 | Failure to File by Due Date" on back) | | |
| 8. | TOTAL AMOUNT DUE | | \$ | |
| | AS PROVIDED IN SECTION 3 | 64.336 FLORIDA STATUTES, THE MINIMUM A | NNUAL 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 |

* 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) | (Title) | (Date) |
|--|---|----------|
| (Preparer of Form - Please Print Name) | Telephone Number () Fax F.E.I. No | Number (|

25-24.514 Cancellation of a Certificate.

(1) The Commission may cancel a company's certificate for any of the following reasons:

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(a) Violation of the terms and conditions under which the authority was originally granted;

(b) Violation of Commission rules or orders;

(c) Violation of Florida Statutes; or,

(d) Failure to provide service for a period of six (6) months.

(2) If a certificated company desires to cancel its certificate, it shall request cancellation from the Commission in writing and shall provide the following with its request.

(a) Statement of intent and date to pay Regulatory Assessment Fee.

(b) Statement of why the certificate is proposed to be cancelled.

(3) Cancellation of a certificate shall be ordered subject to the holder providing the information required by subsection (2).

Specific Authority 350.127(2) FS. Law Implemented 350.113, 350.127(1), 364.03, 364.285, 364.337, 364.345 FS. History-New 1-5-87.

TF299-03-0-D

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
|--|--|
| Complete Items 1, 2; and 3. Also complete item 4 If Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailplece, or on the front if space permits. | A. Received by (Please Print Clearly) B. Date of Delivery C. Signature X Addresse D. Is delivery address different from item 1? Ves |
| 1. Article Addressed to: | If YES, enter delivery address below: No |
| TF299 Visions Vending 8232 Northpointe Bivd. Pensacola, Florida 32514-6545 | 3. Service Type 2. Certified Mail Express Mail Bregistered Return Receipt for Merchandise |
| A The second sec | [™] Insured Mail □ C.O.D. |
| M + IN WI MUST A THE ADDRESS AND | V 4. Restricted Delivery? (Extra Fee) |
| 2. Article Number | Qaid 0001 1760 5243 |
| 1. A A A A A A A A A A A A A A A A A A A | Bet in Becelof |

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COMPANY IDENTIFICATION

Printed on 04/26/2004 at 10:16:33 by PJI

Complete Name: Ronnie Preston Williams d/b/a Visions Vending

Mailing Name: Visions Vending Company Code: TF299 FEID Number:

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RAF ACCOUNT FOR THE PERIOD 01/01/2003 THROUGH 12/31/2003

| Reg. Date: | 01/31/1995 | | Inactive Date: | | | |
|----------------|--------------------|------|----------------|----|----|--------|
| Service: | PAT - Pay Telephon | e | | | | |
| Received: | No RAF Form | | | | Ъ. | |
| Status: | Pending | | | | | |
| Amended: | No | | Extension: | No | | |
| Frozen: | No | | Comments: | No | | |
| Payment Count: | 0 Payments Made to | Date | | | | |
| Operating Rev: | \$0. | 00 | Interstate Rev | : | | \$0.00 |
| RAF Rate: | | | Net RAF Due: | | | \$0.00 |

| Assessment | Due | Paid | Owe |
|---------------|--------|--------|--------|
| RAF | \$0.00 | \$0.00 | \$0.00 |
| Penalty | \$0.00 | \$0.00 | \$0.00 |
| Interest | \$0.00 | \$0.00 | \$0.00 |
| Extension Fee | \$0.00 | \$0.00 | \$0.00 |
| 'Total | \$0.00 | \$0.00 | \$0.00 |

Period covered: 01/01/2003 through 12/31/2003 RAF rate: Operating rev: \$0.00 Gross intrastate rev: \$0.00 Documents: Delinquent letter mailed on 02/20/2004 Delinquent letter mailed on 02/19/2004 RAF form mailed on 12/03/2003

MCD Company Information for TF299

Printed on 09/01/2004 at 08:31:26 by PJI

| Company Code: Complete Name: Mailing Name: Certificate No(s): Status: Regulation Date: Bankruptcy: Company Liaison #1: Title: Mailing Address: | TF299 Ronnie Preston Williams d/b/a Visions Vending Visions Vending 3951 Active 01/31/1995 No Ronnie P. Williams 8232 Northpointe Blvd. |
|---|---|
| Physical Location: | Pensacola, FL 32514-6545 8232 Northpointe Blvd. |
| Phone: Fax: | Pensacola, FL 32514-6545 (850) 478-4235 |
| Related Dockets: | |
| 941286-TC | Application for certificate to provide pay telephone service by RONNIE PRESTON WILLIAMS. |
| 951182-TC | Request for name change on Pay Telephone Certificate No. 3951 from Ronnie Preston Williams to Ronnie Preston Williams d/b/a Visions Vending. |
| 010451-TC | Cancellation by Florida Public Service Commission of Pay Telephone Certificate No. 3951 issued to Ronnie Preston Williams d/b/a Visions Vending for violation of Rule 25-4.0161, F.A.C., Regulatory Assessment Fees. |

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