ORIGINAL

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 041050

STATUS:

_____ Actual Return
_____ Estimated Return
_____ Amended Return

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

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

TG881-03-0-R
Colony 14 Communications, Inc.
PO Box 831371
Stone Mountain, GA 30083-0023

DEPOSIT DATE
5 13 DEC 21 2004

Docket No. 041050-TC (Isler)

FOR PSC USE ONLY
Check# 4884
$ 50.00 06-03-001 003001
$ 12.50 P
06-03-001 004011
$ 5 50 I
Postmark Date 12-16-04
Initials of Preparer RT

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)	$ 8,976
2.	Gross Intrastate Revenue	1,015
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	(444)
4.	**TOTAL REVENUES for Regulatory Assessment Fee Calculation** (Line 2 less Line 3)	$ 571
5.	Regulatory Assessment Fee Due – (Multiply Line 4 by 0.0015)	50
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	12.50
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	5.50
8.	**TOTAL AMOUNT DUE**	$ 68.00

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	9

*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) ACCOUNTANT (Title) 12/16/04 (Date)

(Preparer of Form - Please Print Name)

Telephone Number (404) 391-1101 Fax Number (404) 534-2114

F.E.I. No. 58-2455067

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PSC/CMP-26 (Rev.11/11/99)

DOCUMENT NUMBER-DATE
13334 DEC 20 04
FPSC-COMMISSION CLERK