

Pay Telephone Service Provider Regulatory Assessment Fee Return

041027
TOTAL \$ 118.00

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
1/01/2003 TO 12/31/2003

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

TG450-03-0-R
Texaco of Stuart
3200 SE Federal Highway
Stuart, FL 34997-4912

DEPOSIT DATE
5 1 4 DEC 2 8 2004

Docket No. 041027-TC (Isler)

FOR PSC USE ONLY

Check# 2391

\$ 50.00 06-03-001
003001

\$ 12.50 P 06-03-001
004011

\$ 5.50 I

Postmark Date 12-20-04
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)	CMP	\$.00
2.	Gross Intrastate Revenue	COM	.00
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	CTR	
		ECR	
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	GCL	\$.00
		OPC	
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0015)	MMS	* 50.00
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	RCA	* 12.50
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	SCR	* 5.50
8.	TOTAL AMOUNT DUE	SEC	\$ * 68.00
		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.

Martin Knowles
(Signature of Company Official)

PRESIDENT (Title) 12-18-04 (Date)

MARTIN Knowles
(Preparer of Form - Please Print Name)

Telephone Number (772) 286-4971 Fax Number () SAME

F.E.I. No. 65-0857693 DOCUMENT NUMBER - DATE

13496 DEC 27 04