

State of Florida



ORIGINAL  
Public Service Commission

CAPITAL CIRCLE OFFICE CENTER • 2540 SHUMARD OAK BOULEVARD  
TALLAHASSEE, FLORIDA 32399-0850

-M-E-M-O-R-A-N-D-U-M-

RECEIVED-FPSC  
MAR 11 PM 1:11  
COMMISSION CLERK

DATE: March 11, 2005  
TO: Blanca S. Bayó, Commission Clerk and Administrative Services Director  
FROM: Kiwanis L. Curry, Regulatory Analyst I, Division of Competitive Markets & Enforcement *KLC*  
RE: Docket No. 050065-TC Sopchoppy Payphone Repair Inc

The company has amended page 5, question 13 of their application for certificate to provide pay telephone services.

Also, the period listed after the word "Inc" in the company's name should be removed to reflect the name on file with the Department of State. The company's name should be listed as follows:

Sopchoppy Payphone Repair Inc

- CMP \_\_\_\_\_
- COM \_\_\_\_\_
- CTR \_\_\_\_\_
- ECR \_\_\_\_\_
- GCL \_\_\_\_\_
- OPC \_\_\_\_\_
- MMS \_\_\_\_\_
- RCA \_\_\_\_\_
- SCR \_\_\_\_\_
- SEC 1
- OTH Grant

DOCUMENT NUMBER-DATE

02439 MAR 11 05

FPSC-COMMISSION CLERK

facsimile transmittal

To: **Kiwanis** Fax: **850-413-6663**

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From: **Charlotte Sorrell** Date: **3/10/05**

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Re: **Pay phone Application Amendment** Pages: **2**

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CC:

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Urgent     For Review     Please Comment     Please Reply     Please Recycle



Kiwanis,

For your request, I have amended page 5, question 13. If I need to do anything <sup>else</sup> ~~ore~~, please call.

850-662-9100

Thank you,

Charlotte Sorrell

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- 12. Indicate if applicant or any subsidiary, partner, officers, directors, or any stockholder has been previously adjudged bankrupt, mentally incompetent, or found guilty of any felony or of any crime, or whether such actions may result from pending proceedings.

If so, provide explanation: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- 13. Has the applicant or any subsidiary, partner, officer, director, or any stockholder ever been granted or denied a pay telephone certificate in the State of Florida? (This includes active and canceled pay telephone certificates.) If yes, provide explanation and list the certificate holder and certificate number.

*Yes. M.S. Payphone Repair. Michael Sorrell.  
 WPSR/Michael Sorrell had a license  
 with intentions of putting out payphones. The  
 license was allowed to elapse when the company  
 went out of business before payphones were put out.*

- 14. Is the applicant or any subsidiary, partner, officer, director, or any stockholder a subsidiary, partner, or officer in any other Florida certificated pay telephone company? If yes, give name of company and relationship. If no longer associated with company, give reason why not.

\_\_\_\_\_  
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 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- 15. List other states in which the applicant: