

ORIGINAL

RECEIVED: FPSC  
MAY 19 AM 11:19  
COMMISSION CLERK

**SENDER: COMPLETE THIS SECTION**

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to: **050056**

AAA Reconnect, Inc.  
P. O. Box 10091  
Brooksville FL 34603-0091

**PAA.**

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature  Agent  
**X**  Addressee

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type:

Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

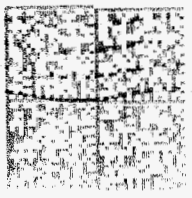
2. Article Number (Transfer from service label) **7002 0860 0001 1761 0001**

State of Florida  
**Public Service Commission**

2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850

PS Form 3811, March 2001 Domestic Return Receipt 102595-01-M-1424

7002 0860 0001 1761 0001



- Not Deliverable As Addressed
- Unable To Forward
- Insufficient Address
- Mover, Let No Address
- Unclaimed  Refused
- Attempted - Not Known
- No Such Street  Vacant
- No Such Number
- No Mail Receptacle
- Forwarding Order Expired



AAA Reconnect, Inc.  
P. O. Box 10091  
Brooksville FL 34603-0091

04/28/2004  
\$04.27  
Roller From 32495  
US POSTAGE  
FIRST NOTICE  
SECOND NOTICE  
RETURN  
5-16

DOCUMENT NUMBER  
**04890** MAY  
FPSC-COMMISSION

FPSC-05-0451-PAA-TV

CMP  
COM  
CTR  
ECR  
GCL  
OPC  
MMS  
RCA  
SCR  
SEC  
OTH