

Pay Telephone Service Provider Regulatory Assessment Fee Return

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

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:

01/01/2005 TO 12/31/2005

DATE

594 OCT 13 2005

TH031-05-0-R
 George P. Henry 050645
 6031 Condor Drive
 Lakeland, FL 33809-5690
 Docket No. 050645-TC (Isler)

Please Complete Below If Official Mailing Address Has Changed

FOR PSC USE ONLY	
Check # <u>5144</u>	RECEIVED PSC
\$ <u>50.00</u>	06-03-001 003001
\$ <u>0</u>	OCT 13 AM 9:05
\$ <u>0</u>	COMMISSION CLERK
Postmark Date <u>10-4-05</u>	06-03-001 004011
Initials of Preparer <u>RL</u>	

GEORGE HENRY (Name of Company) 6031 CONDOR DR. (Address) LAKELAND, FL (City/State) 33809 (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ <u>0.00</u>
CMP 2.	Gross Intrastate Revenue	<u>0.00</u>
COM 3.	LESS: Amounts Paid to Other Telecommunications Companies ⁽¹⁾ (see "2. Fees" on back)	(<u>0.00</u>)
CTR 4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ <u>0.00</u>
ECR 5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0020)	<u>0.00</u>
GCL 6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	<u>0.00</u>
OPC 7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	<u>0.00</u>
RCA 8.	Extension Payment Fee (see "4. Extension" on back)	<u>0.00</u>
SCR 9.	TOTAL AMOUNT DUE (MINIMUM \$50.00)	\$ <u>50.00</u> ⁽²⁾
SGA 10.	Number of pay telephones in operation at close of period covered by this Return	<u>2</u>

(1) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back).
 (2) Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$50 shall be imposed as provided in Section 364.336, Florida Statutes.

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.

George P. Henry (Signature of Company Official) Owner (Title) 10/4/05 (Date)

GEORGE P. HENRY (Preparer of Form - Please Print Name) Telephone Number (863) 853 2752 Fax Number (863) 853 2752

F.E.I. No. _____ DOCUMENT NUMBER-DATE

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