

RECEIVED-FPSC

06 JAN 20 PM 2:27

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: 050679

COMPLETE THIS SECTION ON DELIVERY

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

C. Signature
X Agent
 Addressee

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

Christian Gayden d/b/a Skye Communication Co.
882 S.W. 27th Street
Palm City FL 34990-2902

PSC-06-0037-W-TC

- 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 7004 1160 0004 5751 1190
(Transfer from service to)

State of Florida

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

047J82004132

Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850

7004 1160 0004 5751 1190
RTM TO SENDER



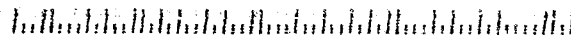
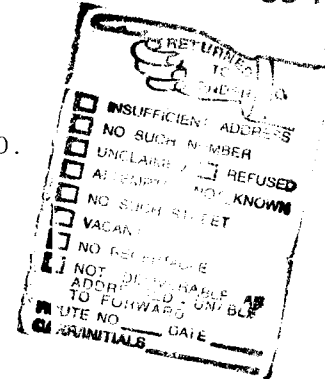
\$04.640

01/12/2006

Mailed From 32399
US POSTAGE

050679-TC

Christian Gayden d/b/a Skye Communication Co.
882 S.W. 27th Street
Palm City FL [redacted] 0-2902



CMP
COM
CTR
ECR
GCL
OPC
RCA
SCR
SGA
SEC
OTH

ORIGINAL

DOCUMENT NUMBER - DATE

00559 JAN 20 08

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