

REQUEST TO ESTABLISH DOCKET

(Please Type)

Date:	3/22/2006	Docket No.:	060268-TC
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1. Division Name/Staff Name:	Division Of Competitive Markets & Enforcement/Isler
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2. OPR:	Division Of The Commission Clerk And Administrative Services
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3. OCR:	Office Of The General Counsel
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4. Suggested Docket Title:	Request for cancellation of PATS Certificate No. 8542 by Mark A Lain & Kathryn L Lain d/b/a MKL Enterprises, effective March 3, 2006.
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5. Suggested Docket Mailing List (attach separate sheet if necessary)

A. Provide NAMES OR ACRONYMS ONLY if a regulated company.

B. Provide COMPLETE NAME AND ADDRESS for all others. (Match representatives to companies.)

1. Parties and their representatives (if any):

2. Interested persons and their representatives (if any):

6. Check one:

Documentation is attached.

Documentation will be provided with recommendation.

DOCUMENT NUMBER-DATE
02560 MAR 22 08
G:\est.doc
 FPSC-COMMISSION CLERK

COMMISSIONERS:
LISA POLAK EDGAR, CHAIRMAN
J. TERRY DEASON
ISILIO ARRIAGA
MATTHEW M. CARTER II
KATRINA J. TEW

STATE OF FLORIDA



DIVISION OF COMPETITIVE MARKETS &
ENFORCEMENT
BETH W. SALAK
DIRECTOR
(850) 413-6600

Public Service Commission

March 22, 2006

Mr. Mark A. Lain, Owner
MKL Enterprises (TH033)
51 Pintail Lane
Woodbine, GA 31569-3801

Dear Mr. Lain:

The Commission received your letter dated February 24, 2006, requesting cancellation of your pay telephone certificate, along with payment of the 2005 Regulatory Assessment Fee. Unfortunately, since you did not request cancellation of the certificate in 2005, the company is also responsible for the 2006 fee (there is a \$50 minimum annual fee even if a company did not have any revenues or ever started operations). The 2006 Regulatory Assessment Fee return form is enclosed.

As information, there are two types of cancellation, one is voluntary, which is granted if a company leaves in good standing and does not owe any fees. The other is involuntary, which is when a certificate is cancelled on the Commission's own motion for violation of a rule, order, or statute. The pay telephone cancellation rule provides that a company requesting cancellation must either pay the current year's (2006) fee or provide a date certain it will be paid, such as 30 days after the Order granting the cancellation. Please use the enclosed blue envelope, which will insure prompt processing.

Please respond by April 7, 2006. In the meantime, if you have any questions, just let me know. I can be reached at (850) 413-6502-phone, (850) 413-6503-fax, by internet e-mail at PIsler@psc.state.fl.us, or at the address below.

Sincerely,

A handwritten signature in cursive script that reads "Paula J. Isler".

Paula J. Isler
Bureau of Telecommunications Service Quality,
Certification and Enforcement

Enclosure

Pay Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
 Estimated Return
 Amended Return

PERIOD COVERED:
01/01/2006 TO 12/31/2006

TH033-06-0-R
 MKL Enterprises
 51 Pintail Lane
 Woodbine, GA 31569-3801

Possible request for cancellation (Isler)

Please Complete Below If Official Mailing Address Has Changed

FOR PSC USE ONLY

Check # _____

\$ _____ 06-03-001
003001

\$ _____ P

_____ 06-03-001
004011

\$ _____ I

Postmark Date _____

Initials of Preparer _____

(Name of Company)

(Address)

(City/State)

(Zip)

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

(1) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back).

(2) _____

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.

(Signature of Company Official)

(Title)

(Date)

(Preparer of Form - Please Print Name)

Telephone Number () _____ Fax Number () _____

F.E.I. No. _____

MKL ENTERPRISES

51 Pintail Lane
Woodbine, Georgia 31569-3801

February 24, 2006

Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850

Re: Certificate Number TH033-05-0-R

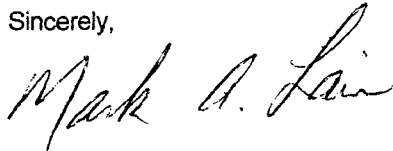
Dear Sir or Madam:

I no longer operate a pay phone business in the State of Florida. I wish to cancel my Certificate.

Enclosed is a payment for \$53.00, which is the fee for 2005, plus penalty and interest as discussed with Mr. David Brown.

Please contact me if there is anything else I need to do.

Sincerely,



Mark A. Lain
Owner, MKL Enterprises

06 MAR -3 AM 8:12

DISTRIBUTION CENTER

Pay Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission

FOR PSC USE ONLY	
Check #	<u>1051</u>
\$ <u>50.00</u>	06-03-001 003001
\$ <u>2.50</u> P	06-03-001 004011
\$ <u>.50</u> I	
Postmark Date	<u>2-28-06</u>
Initials of Preparer	<u>RT</u>

STATUS:

- Actual Return
- Estimated Return
- Amended Return

(See Filing Instructions on Back of Form)

TH033-05-0-R
 MKL Enterprises
 51 Pintail Lane
 Woodbine, GA 31569-3801

634 FEB 27 2006

PERIOD COVERED:
01/01/2005 TO 12/31/2005

Records 5

Please Complete Below If Official Mailing Address Has Changed

MKL ENTERPRISES (Name of Company) SAA - NO CHANGE (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ <u>ϕ</u>
2.	Gross Intrastate Revenue	<u>ϕ</u>
3.	LESS: Amounts Paid to Other Telecommunications Companies ⁽¹⁾ (see "2. Fees" on back)	(<u>ϕ</u>)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ <u>ϕ</u>
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0020)	<u>ϕ</u>
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	<u>2.50</u>
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	<u>.50</u>
8.	Extension Payment Fee (see "4. Extension" on back)	<u>ϕ</u>
9.	TOTAL AMOUNT DUE (MINIMUM \$50.00)	\$ <u>53.00</u> ⁽²⁾
10.	Number of pay telephones in operation at close of period covered by this Return	<u>ϕ</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.

Mark A. Lain (Signature of Company Official) OWNER (Title) 2/24/06 (Date)

MARK A. LAIN (Preparer of Form - Please Print Name) Telephone Number (912) 729-3028 Fax Number ()

F.E.I. No. _____

Paula Isler

From: Ray Kennedy
Sent: Tuesday, March 14, 2006 3:13 PM
To: Paula Isler
Subject: FW: New filing in undocketed matter

-----Original Message-----

From: Matilda Sanders
Sent: Thursday, March 02, 2006 1:41 PM
To: Lisa Harvey; Beth Salak; Cheryl Bulecza-Banks; Rick Moses; Sally Simmons; Carolyn Craig; LaSandra Givens
Subject: New filing in undocketed matter

DOCUMENT DESCRIPTION = Mark A Lain & Kathryn L Lain d/b/a MKL Enterprises - MCD update form with handwritten note on form "no longer operating a pay phone business in the state of Florida.'

DOCUMENT PATH =
file://L:\PSC\LIBRARY\FILINGS\06\01754-06

Document ID = 01754-06
Document Filed 03/01/06

The filing described above is now available in PDF format, and may also be available in WordPerfect or other formats.

To access it, click on the DOCUMENT PATH link. This will pop up a Windows Explorer window. You will see the PDF (Adobe Acrobat) version; you will also see other versions if they exist. Double-click on the preferred version and the document will open.

If you need to cut/paste/search in the document and find you can't, try later when the reformatted version is available. (For more information, see PDF Tips on the How To menu.)

You can also go to the docket in CMS by triple-clicking on the DOCKET NUMBER, typing ctrl-C to copy, and using the paste icon to paste the docket number into the query line in CMS.

This is an automatically generated e-mail; no response/reply is necessary.

3-1-06- No Reg to Council dkt
orig let to OCA/Hlynn for further handling

060000

OK
3-1-06

ORIGINAL

Mark A Lain & Kathryn L Lain d/b/a MKL Enterprises

Company Code: TH033

Certificate No(s): 8542

Physical Location: 51 Pintail Lane Woodbine, GA 31569-3801	ENTER CORRECTIONS BELOW: <hr/> <hr/> <hr/> <hr/>
Mailing Address: 51 Pintail Lane Woodbine, GA 31569-3801	<hr/> <hr/> <hr/> <hr/>
Liaison Officer(s): 1. Mark A. Lain, Owner, (912) 729-3028 2. Kathryn L. Lain, Owner, (912) 729-3028	<hr/> <hr/> <hr/> <hr/>
Fax No(s): (912) 576-9669, (912) 576-9669	<hr/> <hr/> <hr/> <hr/>
E-mail address: mkl@tds.net	<hr/> <hr/> <hr/> <hr/>
Web address:	<hr/> <hr/> <hr/> <hr/>
Federal Employee ID No.: 54-2157552	<hr/> <hr/> <hr/> <hr/>

RECEIVED - FPSC
06 MAR - 11 AM 10:07
COMMISSION CLERK

IMPORTANT NOTICE

The following section is applicable ONLY to companies with d/b/a as part of their official company name.

- CMP** _____ All official correspondence is addressed to the "Mailing Name" of regulated companies. The
- COM** _____ "Mailing Name" is the last d/b/a of the company's official name. Our records reflect the mailing
- CTR** _____ name shown below for your company. If you prefer to receive official correspondence in
- ECR** _____ another mailing name, please make the change in the space provided. The name can be no
- GCL** _____ longer than 58 characters (including spaces) and MUST be part of the official company name.
- OPC** _____ Mailing name:
- RCA** _____ MKL Enterprises
- SCR** _____
- SGA** _____
- SEC** 1 _____ COMPLETED BY: MARK A. LAIN DATE: 2/25/2006
- OTH** _____ NO LONGER OPERATING A PAY PHONE BUSINESS IN THE STATE OF FLORIDA.

Mark A. Lain

DOCUMENT NUMBER-DATE
01754 MAR-1 06
FPSC-COMMISSION CLERK

TH033

MCD Company Information for TH033

Printed on 03/21/2006 at 16:42:57 by PJI

Company Code: TH033
Complete Name: Mark A Lain & Kathryn L Lain d/b/a MKL Enterprises
Mailing Name: MKL Enterprises
Certificate No(s): 8542
Status: Active
Regulation Date: 12/13/2004
Bankruptcy: No
Company Liaison #1: Mark A. Lain
Title: Owner
Mailing Address: 51 Pintail Lane

Physical Location: Woodbine, GA 31569-3801
51 Pintail Lane

Phone: Woodbine, GA 31569-3801
(912) 729-3028
Fax: (912) 576-9669

Related Dockets:

041181-TC

Application for certificate to provide pay telephone service by
Mark A Lain & Kathryn L Lain d/b/a MKL Enterprises.