

ORIGINAL

RECEIVED-FPSC

06 JUL 26 PM 3:49

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: 060465

WEB-stations, Inc.
716 Wesley Avenue, Suite 14
Tarpon Springs, FL 34689-6799

PSC-06-0614-PAA-TC

2. Article Number
(Transfer from service label)

7004 1160 0004 5751 3903

State of Florida

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850



7004 1160 0004 5751 3903

ANK
7-22

WEB-stations, Inc.
716 Wesley Avenue, Suite 14
Tarpon Springs, FL 34689-6799

COMPLETE THIS SECTION ON DELIVERY

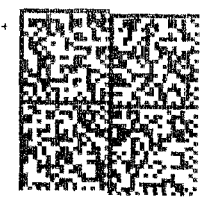
A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature
X Agent
 Addressee

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

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

4. Restricted Delivery? (Extra Fee) Yes



US POSTAGE
Mailed From 32399
07/20/2006
\$04.640
047182004132

DOCUMENT NUMBER-DATE

06587 JUL 26 8

FPSC-COMMISSION CLERK

CMP
COM
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