

**ORIGINAL**

# 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

*PAUL A  
Records*

TG899-06-0-R  
 Eric Kofler *070020-TC*  
 3154 Jackson Drive  
 Holiday, FL 34691-3362  
**DEPOSIT**  
*699 JAN 04 2007*

Please Complete Below If Official Mailing Address Has Changed

**FOR PSC USE ONLY**

Check # 1353

\$ 50.00 06-03-001  
003001

\$ \_\_\_\_\_ E

\$ \_\_\_\_\_ P 06-03-001  
004011

\$ \_\_\_\_\_ I

Postmark Date 12-29-06

Initials of Preparer RT

(Name of Company)

(Address)

(City/State)

(Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ _____
2.	Gross Intrastate Revenue	_____
<del>3.</del>	<del>LESS: Amounts Paid to Other Telecommunications Companies (1)</del> (see "2. Fees" on back)	( _____ )
4.	<b>TOTAL REVENUES for Regulatory Assessment Fee Calculation</b> (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.	<b>TOTAL AMOUNT DUE (MINIMUM \$50.00)</b>	\$ <u>59</u> (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) 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.

*Eric Kofler* (Signature of Company Official)      OWNER (Title)      12.27.06 (Date)

ERIC KOFLER (Preparer of Form - Please Print Name)      Telephone Number 813/7319773      Fax Number \_\_\_\_\_

F.E.I. No. \_\_\_\_\_      00058 JAN-35

FPSC COMMISSION CLERK

MR. BROWN!

Holiday, 12.27.06

Dear Sir!

Please eliminate the  
Payphone license for  
ERIC KOFLER  
(TG 888-06-0-R).

Eric Kofler

ERIC KOFLER