

Competitive Local Exchange Company Regulatory Assessment Fee Return

Florida Public Service Commission

ORIGINAL

STATUS:

- Actual Return
- Estimated Return
- Amended Return

(See Filing Instructions on Back of Form)

TX580-06-0-R
 Palm Beach Community College
 % Mr. Marion Sanders
 4200 Congress Avenue
 Lake Worth, FL 33461-4705
 certificate DEPOSIT DATE
 7883
 703 JAN 19 2007

FOR PSC USE ONLY	
Check #	00822676
\$	50.00 06-03-001 003001
\$	E
\$	P 06-03-001 004011
\$	I
Postmark Date	1-17-07
Initials of Preparer	R

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

Records /
 Paula

Please Complete Below If Official Mailing Address Has Changed

 (Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Basic Local Services	\$ 0	\$ 0
CMP 2.	Long Distance Services (IntraLATA only) ⁽¹⁾	_____	_____
3.	Access Services	_____	_____
COM 4.	Private Line Services	_____	_____
5.	Leased Facilities & Circuits Services	_____	_____
CTR 6.	Miscellaneous Services	_____	_____
ECR 7.	TOTAL REVENUES	_____	\$ 0
8.	LESS: Amounts Paid to Other Telecommunications Companies ⁽²⁾	_____	_____
GCL 9.	NET INTRASTATE OPERATING REVENUE for Regulatory Assessment Fee Calculation (Line 7 less Line 8)	_____	\$ _____
OPC 10.	Regulatory Assessment Fee Due (Multiply Line 9 by 0.0020)	_____	_____
11.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____	_____
RCA 12.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____	_____
13.	Extension Payment Fee (see "4. Extension " on back)	_____	_____
SCR 14.	TOTAL AMOUNT DUE (\$50 MINIMUM)	_____	\$ 50.00 ⁽³⁾

SGA (1) Other long distance revenue must be listed on the Interexchange Regulatory Assessment Fee Return.
 (2) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back).
SEC 1 (3) 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.
OTH N/A

CURRENT COMPANY STATUS

- () Facilities-Based Provider
- () Reseller
- (X) Other: not providing service at this time

BILLING INFORMATION

Complete below if billing agent is other than yourself.

 (Name) (Address: City/State/Zip) (Telephone)

COMPANY INFORMATION

Do you lease telecommunications' facilities? () YES (X) NO
 If YES, who do you lease these facilities from? Name: _____
 Address: _____

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.

Paula Sanders Chief Information Officer 1/8/07
 (Signature of Company Official) (Title) (Date)

Marion Sanders, Telecomm/Network Analyst Telephone Number (561) 868-3722 DOCUMENT NUMBER DATE
 (Preparer of Form - Please Print Name) Fax Number (561) 868-3259

F.E.I. No 59-1216000

00525 JAN 19 07



4200 CONGRESS AVE
LAKE WORTH, FL 33461-4796

561-868-3241 tel
561-868-3259 fax

January 8, 2007

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

Attention: Fiscal Services

To Whom It May Concern:

This letter serves as notice that Palm Beach Community College no longer requires service of certificate number 7843 for competitive local exchange and wish to cancel effective December 31, 2006.

Thank you for your assistance in this matter.

Sincerely,

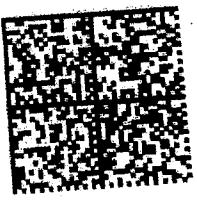
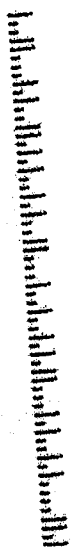
A handwritten signature in black ink, appearing to read 'Anthony Parziale', written over a large, stylized initial 'AP'.

Anthony Parziale
Chief Information Officer
Information Technology

4200 CONGRESS AVENUE
LAKE WORTH
FL 33461-4796



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01/17/2007
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