

ORIGINAL

070343-TI

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/2008

Interexchange Regulatory Assessment Fee Return

Florida Public Service Commission

STATUS:

- X Actual Return
Estimated Return
Amended Return

(See Filing Instructions on Back of Form)

TI459-07-0-R
ASC Telecom, Inc.
% Sprint Nextel Corporation
233 Peachtree Street, N.E., Suite 2200
Atlanta, GA 30303-1504
DEPOSIT DATE
7 50 JUN 0 5 2007
Request for Cancellation

FOR PSC USE ONLY
Check# 0015182431
\$ 700.00 06-03-001
003001
\$ E
\$ P 06-03-001
004001
\$ I
Postmark Date 6-4-07
Initials of Preparer RT

PERIOD COVERED:
01/01/2007 TO 12/31/2007

Records ↓
PANA

Please Complete Below If Official Mailing Address Has Changed

(Name of company) (Address) (City / State) (Zip) CMP COM CTR ECR GCL OPC RCA SCR SGA SEC OTH

Table with columns: LINE NO., FLORIDA GROSS OPERATING REVENUE, INTRASTATE REVENUE, and various service categories (1-13). Total amount due is \$700.00.

- (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 \$700 shall be imposed as provided in Section 364.336, Florida Statutes.

CURRENT COMPANY STATUS

- ( ) Facilities-Based Carrier ( ) Reseller ( ) Call Aggregator
( ) Alternative-Operator Service ( ) Rebiller (X) Other: Not Active

BILLING INFORMATION

Complete below if billing agent is other than yourself
(Name) (Address: City/State/Zip) (Telephone)
What is the total amount of customer deposits collected?
Amount: \$ for 20
What is the total amount of bond held (if applicable)?
Amount: \$ Expires:

COMPANY INFORMATION

Do you lease telecommunications' facilities? ( ) YES ( ) 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.

Signature of Al Clark

Supervisor - Regulatory Reporting (Title)

5/31/07 (Date)

Al Clark (Preparer of Form - Please Print Name)

Telephone Number (913) 315-7015 Fax Number (913) 315-0628

F.E.I. No. 48-1155968

DOCUMENT NUMBER DATE
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FPSC-COMMISSION CLERK