

Records + Paula **Shared-Tenant Service Provider Regulatory Assessment Fee Return**

STATUS:
 Actual Return
 Estimated Return
 Amended Return

PERIOD COVERED:
 01/01/2007 TO 10/02/2007

Florida Public Service Commission
 (See Filing Instructions on Back of Form)

TS181-07-0-R
 Gaedeke Holdings Ltd.
 Northbridge Centre Executive Suites
 515 North Flagler Drive, Suite 300-P
 West Palm Beach, FL 33401-4318
 070537 805 JAN 25 2008

FOR PSC USE ONLY
 Check # 8722
 \$ 100.00 06-03-001 003001
 \$ _____ E
 \$ _____ P 06-03-001 004011
 \$ _____ I
 Postmark Date 1-22-08
 Initials of Preparer RT

DEC 17 REC'D

Please Complete Below If Official Mailing Address Has Changed

Gaedeke Group (Name of Company) 515 N. Flagler Drive (Address) West Palm Beach (City/State) 33401 (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	CMP	AMOUNT
1.	Gross Intrastate Operating Revenue	COM	\$ _____
2.	LESS: Amounts Paid to Other Telecommunications Companies ⁽¹⁾ (see "2. Fees" on back)	CTR	\$ _____
3.	NET INTRASTATE OPERATING REVENUE for Regulatory Assessment Fee Calculation (<i>Line 1 less Line 2</i>)	ECR	\$ _____
4.	Regulatory Assessment Fee Due (<i>Multiply Line 3 by 0.0020</i>)	GCL	\$ _____
5.	Penalty For Late Payment (see "3. Failure to File by Due Date" on back)	OPC	\$ _____
6.	Interest For Late Payment (see "3. Failure to File by Due Date" on back)	RCA	\$ _____
7.	<u>Extension Payment Fee</u> (see "4. Extension" on back)	SCR	\$ _____
8.	TOTAL AMOUNT DUE (MINIMUM \$100.00)	SGA	\$ _____
		SEC	\$ _____
		OTH	\$ <u>100.00</u> ⁽²⁾

RECEIVED-FPSC
 08 JAN 25 AM 8:54
 COMMISSION CLERK

The business was closed in early 2007, please consider our request for cancellation.

(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 \$100 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.

Kirk R. Fetter (Signature of Company Official) *U.P.* (Title) *1/15/07* (Date)

KIRK R. FETTER (Preparer of Form - Please Print Name) Telephone Number *(561) 835-0100* Fax Number *(561) 655-5275*

DOCUMENT NUMBER - DATE I. No. *75-2415878*

00619 JAN 25 08