



Confinement Telecommunications Services

080702-18

December 1, 2008

RECEIVED-FPSC
08 DEC 10 AM 9:11
COMMISSION
CLERK

Florida Public Service Commission
2540 Shumard Oak Blvd.
Tallahassee, Fl. 32399-0850

To Whom It May Concern:

Please be informed that we wish to cancel our IXC certificate (TK-145) and our PATS certificate (#8686) as of December 31, 2008. Our company has not yet commenced business operations within the State of Florida and plans to reapply for certification in the future, at a more appropriate time.

Thank you for your assistance in this matter.

Sincerely,

E.R. Benson
President & CEO

COM _____
ECR _____
GCL _____
OPC _____
RCP _____
SSC _____
SGA _____
ADM _____
CLK _____

nonny

DOCUMENT NUMBER - DATE
11398 DEC 10 08
FPSC-COMMISSION CLERK

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:
 01/01/2008 TO 12/31/2008

*Records + Paula
letter attached*

TH069-08-0-R EAGLETEL, INC. P. O. Box 2342 Brevard, NC 28712-2342 <div style="text-align: center; margin-top: 10px;"> POST DATE 8 8 2 - DEC 1 0 2008 </div>
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Please Complete Below If Official Mailing Address Has Changed

FOR PSC USE ONLY	
Check # <u>002940</u>	
\$ <u>100.00</u>	06-03-001 003001
\$ _____ E	
\$ _____ P	06-03-001 004011
\$ _____ I	
Postmark Date <u>12-01-08</u>	
Initials of Preparer <u>RT</u>	

(Name of Company)	(Address)	(City/State)	(Zip)
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LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ <u>Ø</u>
2.	Gross Intrastate Revenue	_____
3.	LESS: Amounts Paid to Other Telecommunications Companies ⁽¹⁾ (see "2. Fees" on back)	(_____)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ <u>Ø</u>
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.	TOTAL AMOUNT DUE (MINIMUM \$100.00)	\$ <u>100</u> ⁽²⁾
10.	Number of pay telephones in operation at close of period covered by this Return	<u>Ø</u>

(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.

 (Signature of Company Official)	<u>CEO</u> (Title)	<u>12-1-08</u> (Date)
<u>E. Benson</u> (Preparer of Form - Please Print Name)	Telephone Number <u>828 885-7998</u> Fax Number <u>828 885-5498</u>	F.E.I. No. <u>20-1757693</u>

Interexchange Company Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:

01/01/2008 TO 12/31/2008

TK145-08-0-R
 EAGLETEL, INC.
 P. O. Box 2342
 Brevard, NC 28712-2342

882 • DEC 10 2008

FOR PSC USE ONLY

Check # 002937

\$ 700.00 06-03-001
003001

\$ _____ E

\$ _____ P 06-03-001
004011

\$ _____ I

Postmark Date 12-01-08

Initials of Preparer RT

*Records +
pawa*

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.	Long Distance Services	\$ <u>0</u>	\$ <u>0</u>
2.	Access Services	_____	_____
3.	Private Line Services	_____	_____
4.	Leased Facilities & Circuits Services	_____	_____
5.	Miscellaneous Services	_____	_____
6.	TOTAL Telephone Services	\$ _____	\$ _____
7.	LESS: Amounts Paid to Telecommunications Companies ⁽¹⁾	(_____)	(_____)
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation	_____	\$ _____
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0020)	_____	_____
10.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____	_____
11.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____	_____
12.	Extension Payment Fee (see "4. Extension" on back)	_____	_____
13.	TOTAL AMOUNT DUE (\$700.00 MINIMUM)	_____	\$ <u>700</u> ⁽²⁾

(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
- Alternate-Operator Service
- Rebiller
- Other: _____

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/her duty shall be guilty of a misdemeanor of the second degree.

 (Signature of Company Official) (Title) (Date) 12-1-08

E. Benson
 (Preparer of Form - Please Print Name) Telephone Number (828) 885-7998 Fax Number (828) 885-5498

F.E.I. No. 20-1757693