

#2649
8/12/96
Laf

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

\$100.00

1. LEGAL NAME OF THE APPLICANT
ERIC J BLAKE 960908TC

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS
ACT COMMUNICATIONS

3. ADDRESS OF THE APPLICANT(S)
STREET 2176 WATER OAK DR.
CITY CLEARWATER FL 11356 + DATE AUG 13 '96
STATE & ZIP FLORIDA 34624

4. TYPE OF ORGANIZATION (CHECK ONE)
A. INDIVIDUAL DOING BUSINESS UNDER HIS/HER OWN NAME:

DOCUMENTATION: No other documentation needed.

B. PARTNERSHIP:

DOCUMENTATION: Attach a copy of the partnership agreement, and a list with the name and address of all partners.

C. CORPORATION:

DOCUMENTATION: Attach proof that articles of incorporation have been filed with the Florida Secretary of State's Office. If incorporated outside of Florida, attach proof from the Florida Secretary of State that applicant has authority to operate in Florida and provide name and address of Florida Registered Agent.

NAME _____

ADDRESS _____

D. DOING BUSINESS UNDER A FICTITIOUS NAME:

DOCUMENTATION: Attach proof that fictitious name has been registered with the Florida Secretary of States Office.

DOCUMENT NUMBER-DATE

08396 AUG 12 '96

FPSC-RECORDS/REPORTING

FPSC-RECORDS/REPORTING

5. PROVIDE NAME, TITLE, AND TELEPHONE NUMBER OF THE INDIVIDUAL WHO IS RESPONSIBLE FOR COMMISSION CONTACTS:

NAME: ERIC J BLAKE
TITLE: OWNER
PHONE: 813-524-1339

6. HAS APPLICANT OR ANY SUBSIDIARY, PARTNER, OFFICER, DIRECTOR, ETC., OR IN THE CASE OF A CLOSELY HELD CORPORATION ANY SHAREHOLDER OF THE APPLICANT EVER BEEN GRANTED OR DENIED A PAY TELEPHONE CERTIFICATE IN THE STATE OF FLORIDA? THIS INCLUDES ACTIVE AND CANCELLED PAY TELEPHONE CERTIFICATES.

NO

7. IF THE ANSWER TO QUESTION 6 IS YES, PLEASE EXPLAIN AND LIST THE CERTIFICATE HOLDER AND CERTIFICATE NUMBER.

NA

8. LIST THE STATES IN WHICH THE APPLICANT:

A. IS CURRENTLY PROVIDING PAY TELEPHONE SERVICE

NONE

B. HAS APPLICATIONS PENDING TO BE CERTIFICATED AS A PAY TELEPHONE PROVIDER.

NONE

C. HAS BEEN DENIED AUTHORITY TO OPERATE AS A PAY TELEPHONE PROVIDER. EXPLAIN CIRCUMSTANCES.

NO

D. HAS HAD REGULATORY PENALTIES IMPOSED FOR VIOLATIONS OF TELECOMMUNICATIONS STATUTES. EXPLAIN CIRCUMSTANCES.

NO

9. PLEASE INDICATE IF ANY OFFICERS OF THE CORPORATION, PARTNERSHIP OR INDIVIDUAL APPLICANT HAVE BEEN ADJUDGED BANKRUPT, MENTALLY INCOMPETANT, OR FOUND GUILTY OF ANY FELONY OR OF ANY CRIME, OR WHETHER SUCH ACTIONS MAY RESULT FROM PENDING PROCEEDINGS.

No

10. PLEASE CHECK THE SERVICES THAT WILL BE PROVIDED:

LOCAL	[X]
LONG DISTANCE	[X]
COIN	[X]
CALLING CARD	[X]
CREDIT CARD	[X]
OTHER, DESCRIBE	[X]

11. PROPOSED NUMBER OF PAY TELEPHONE INSTRUMENTS THE APPLICANT PLANS TO PLACE IN THE FIRST YEAR: FIVE (5).

12. HOW DOES THE APPLICANT INTEND TO SERVICE AND MAINTAIN EACH PAYPHONE?

PERSONALLY	[X]
FULL-TIME TECHNICIAN	[]
PART-TIME TECHNICIAN	[]
SERVICE/REPAIR/MAINTENANCE CONTRACT	[]
OTHER, DESCRIBE	[]

13. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL PROVIDE ACCESS TO ALL LOCALLY AVAILABLE LONG DISTANCE CARRIERS VIA IOXXX+0, 950-XXXX, AND 1-800? (See Rule 25-24.515(6), F.A.C.)

yes

14. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL CONFORM TO SUBSECTIONS 4.29.2 - 4.29.4 and 4.29.7 - 4.29.8 OF THE AMERICAN NATIONAL STANDARDS SPECIFICATIONS FOR MAKING BUILDINGS AND FACILITIES ACCESSIBLE AND USABLE BY PHYSICALLY HANDICAPPED PEOPLE (ATTACHMENT F)? (See Rule 25-24.515(14), F.A.C.)

yes

I, THE UNDERSIGNED OWNER OR OFFICER OF THE ABOVE NAMED ENTITY, HAVE READ THE FOREGOING AND DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE INFORMATION IS A TRUE AND CORRECT STATEMENT. I AM AWARE THAT PURSUANT TO s. 837.06, FLORIDA STATUTE, 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. I WILL COMPLY WITH ALL CURRENT AND FUTURE COMMISSION REQUIREMENTS REGARDING THE PAY TELEPHONE SERVICE. I UNDERSTAND THAT A NON-REFUNDABLE APPLICATION FEE OF \$100 MUST ACCOMPANY THE APPLICATION. ALSO, I UNDERSTAND THAT I AM REQUIRED TO PAY A REGULATORY ASSESSMENT FEE (MINIMUM \$50.00 PER CALENDAR YEAR), FILE AN ANNUAL PAY TELEPHONE SERVICE REPORT, AND PAY GROSS RECEIPTS TAX. FURTHERMORE, I AGREE TO KEEP THE COMMISSION ADVISED OF ANY CHANGES IN THE NAMES OR ADDRESSES LISTED ABOVE WITHIN TEN (10) DAYS OF THE CHANGE.

Eric J. Blake

(SIGNATURE OF OWNER/CHIEF OFFICER OF APPLICANT)

DATE: 8/1/96

APPLICANT ACKNOWLEDGEMENT CARD

Applicant ERIC J BLAKE

I acknowledge receipt and understanding of the Florida Public Service Commission's Rules and Requirements relating to my provision of Pay Telephone Service.

Signature Eric J Blake

Title OWNER

Date 3/1/96

THIS MUST BE COMPLETED AND RETURNED WITH THE APPLICATION BEFORE THE CERTIFICATION PROCESS BEGINS. FAILURE TO DO SO WILL RESULT IN A DELAY OF THE CERTIFICATE BEING ISSUED.

ERIC J BLAKE

2176 WATEROAK DR. CLEARWATER FLORIDA 34624
Phone 813-524-1339 Fax 813-524-0084

RECEIVED
PUBLIC SERVICE COMMISSION
96 AUG 12 AM 9 52
MAIL ROOM

August 08, 1996

FL. PUBLIC SERVICE COMMISSION:

960908-TC

Dear Sirs,

Please accept my application for a certificate to operate Pay Telephones in Florida. if you need any additional information please contact me.

Thank You,

Eric J Blake
DBA- ACI Communications

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

Section 1

1. ACI COMMUNICATIONS
Fictitious Name to be Registered

2. 2176 WATEROAK DR
Mailing Address of Business

City CLEARWATER, Florida 34624
Zip Code

3. Florida County Pinellas

4. FEI Number:

This space for office use only

Section 2

A. Owner(s) of Fictitious Name If Individual(s) (use an attachment if necessary):

1. BLAKE ERIC J
Last First MI
2176 WATEROAK DR.
Address
CLEARWATER FL. 34624
City State Zip Code
SS# 136-40-9073

2. _____
Last First MI
Address
City State Zip Code
SS# _____

B. Owner: _____

1. Corpor _____
Ac _____
City _____
Florida _____
FEI Num _____

ERIC J. BLAKE
2176 WATEROAK DR. N.
CLEARWATER, FL. 34624-6657

8/1/96
\$60.00
Sixty Dollars
100
PREMIER ACCOUNT

FOR Fict Name Reg. - ACI comm. Eric J. Blake

Signature of Owner: Eric J. Blake Date: 8/1/96
Phone Number: 813-524-1339

Signature of Owner: _____ Date: _____
Phone Number: _____

Section 3

Section 4

FOR CANCELLATION COMPLETE SECTION 4 ONLY:
FOR FICTITIOUS NAME OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:

I (we) the undersigned, hereby cancel the fictitious name _____
_____, which was registered on _____ and was assigned
registration number _____

Signature of Owner _____ Date _____
Signature of Owner _____ Date _____

Mark the applicable boxes Certificate of Status — \$10 Certified Copy — \$30

FILING FEE: \$50

Note: Acknowledgements/certificates will be sent to the address in Section 1 only. CR4E 001 (1/91)

ERIC J. BLAKE
2176 WATEROAK DR. N
CLEARWATER, FL 34624-6657

2645
83-617/831
39

PAY TO
THE ORDER OF

Pinellas Review
Twenty Five & 50/100 \$22.50
DOLLARS



906-039
South Clearwater Office 29
2206 McLeary Road
Clearwater, Florida 34624



PREMIER ACCOUNT

FOR *ACI COMM.*
NAME *ACI COMM.* - notice

Eric J Blake

FICTITIOUS NAME NOTICE

Notice is hereby given that the undersigned, desiring to engage in business under the fictitious name: ACI COMMUNICATIONS

at (address) 2176 WATEROAK DR
CLEARWATER FL. 34624

intends to register said name with the Division of Corporations of the Florida Department of State, in compliance with Section 865.09, Florida Statutes

Fictitious Name Registration Packet can be picked up at County Courthouse; Occupational License Office; or from the Review.

ERIC J BLAKE

Please Type or Print Owner's Name

Enclosed is my check for \$22.50. Please publish my business (fictitious) name as stated above.

Send proof of publication to:

ERIC BLAKE
2176 WATEROAK DR
CLEARWATER FL 34624

Telephone # 524-1339



400 N. Ashley Dr. #2080, Tampa, FL 33602
P.O. Box 6130 • Clearwater, FL 34618-6130
Phone (813) 221-9505 • Fax 221-9403

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

#2649
8/13/96
Laf

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CITY CLEARWATER FL
STATE & ZIP FLORIDA 34624

TREAS REF

DATE

AUG 13 '96

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NAME

ERIC J. BLAKE
2176 WATEROAK DR. N.
CLEARWATER, FL 34624-6657

2649

83-812/831
20

9/1/96

MEMBER OF THE PUBLIC SERVICE COMMISSION
One Hundred Dollars

* en registered with

amen bank
South Clearwater Office 20
2290 Bellvue Road
Clearwater, Florida 34624



PREMIER ACCOUNT

Eric J Blake

cert. to provide P.S.