

REQUEST TO ESTABLISH DOCKET
(PLEASE TYPE)

Date: January 7, 1998

Docket No. 980040-TT

1. Division Name/Staff Name: Communications/T.Williams

2. OPR: T.Williams

3. OCR: _____

4. Suggested Docket Title: Request to cancel Interexchange Telecommunication Service Certificate No. 553 by MSI COMMUNICATIONS (T1776).

5. Suggested Docket Mailing List (attach separate sheet if necessary)

- A. Provide NAMES ONLY for regulated companies or ACRONYMS ONLY regulated industries, as shown in Rule 25-22.104, F.A.C.
- B. Provide COMPLETE name and address for all others. (Match representatives to clients.)

1. Parties and their representatives (if any)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. Interested Persons and their representatives (if any)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

6. Check one:
 Documentation is attached.
 Documentation will be provided with the recommendation.

DOCUMENT NUMBER-DATE
00355 JAN-7 98
FISC REC FOS/RECDPT NG



Public Service Commission

-M-E-M-O-R-A-N-D-U-M-

DATE: January 2, 1998

TO: Tommy Williams, Division of Communication

FROM: Nonnye B. Grant, Administrative Assistant, Division Of Records And Reporting *nbg*

RE: MSI Communications - (TI776)

Fiscal forwarded a copy of the regulatory assessment fee forms which had a change address for the above Company. Have made the necessary updates in MCD. I notice that on the top of the form the Company has written "cancel certificate", forwarding copy to you for further handling. (Didn't know if Fiscal forwarded a copy to you or not)

Checked CMS and there is no opened docket requesting cancellation of their certificate. Please check into this and follow up with the appropriate steps that need to be done. Until their certificate is canceled, they will remain an "active" company.

Thanking you in advance for your assistance.

/nbg
Attachment

RECEIVED

JAN 05 1998

CMU

Interexchange Company Regulatory Assessment Fee Return

STATUS:

Actual Return
 Estimated Return

PERIOD COVERED:
01/01/1997 TO 12/31/1997

Florida Public Service Commission

(See Filing Instructions on Back of Form)

TI776 P173 996 788
MSI Communications
414 South Broad Street
Brooksville, FL 34601-2826

CANCELLED Certificate
DEC 26 MAIL ROOM
DATE 12 29 1997

FOR PSC USE ONLY	
Check#	6538
\$	50.00
	0603001 003001 0603001 004011
Postmark Date	12-23-97
Initials of Preparer	SPD/ingm

Please Complete Below If Address Has Changed

(Name of Company) 1204 S. Broad St. (Address) Brooksville FL 34601- (City/State) (Zip) 313

LINE NO.	ACCOUNT CLASSIFICATION	GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Long Distance Services	\$ 0	\$ 0
2.	Access Services		
3.	Private Line Services		
4.	Leased Facilities & Circuits Services		
5.	Miscellaneous Services		
6.	TOTAL Telephone Services		
7.	LESS: Amounts Paid For Services** Telephone Companies* (Attac		
8.	TOTAL REVENUES For Reg		
9.	Regulatory Assessment Fee Du		
10.	Penalty for Late Payment		
11.	Interest for Late Payment		
12.	TOTAL AMOUNT DUE		\$ 50.00

*need memo
no debt opened
to cancel*

*Each amount paid by an interexchange telecomm from intrastate revenue for purposes of determin

al service for use of the local network shall be deducted ecommunications company.

ANNUAL FEE IS \$50

AS PROVIDED IN

() Facilities-Based Carrier () Re
() Alternate-Operator Service () Re

FOR NON-Active

Complete below if billing agent if other than yourself.

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

What is the total amount of customer deposits collected?
Amount: \$ 0 for 1997

What is the total amount of bond held (if applicable)?
Amount: \$ _____ Expires: _____

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

Kevin E. Morrill
(Signature of Company Official)
Kevin E. Morrill
(Please Print Name)

President
(Title)
12-15-97
(Date)

Telephone Number (352) 544-0620
F.E.I. No. 59-2688304