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DEPOSIT DATE  
D7 09 • FEB 11 1998

ATTACHMENT B

RECEIVED  
FEB 15 1998  
MAIL ROOM

### FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

1. LEGAL NAME OF THE APPLICANT RMAC COMMUNICATIONS, ENCL

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS \_\_\_\_\_

SAME / DBA CUSTOM COMMUNICATIONS

3. ADDRESS OF THE APPLICANT(S)

PHYSICAL STREET 3506 23<sup>RD</sup> AVENUE WEST MAILING P.O. BOX 1611

CITY BRADENTON BRADENTON

STATE & ZIP CODE FL 34205 FL 34206-1611

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 ROBERT B. MACDONALD

DATE

TIME

# FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

ADDRESS MAILING: P.O. BOX 1611, GRADENOR, FL 34206-1611

PHYSICAL: 3506 23<sup>RD</sup> AVE. WEST, GRADENOR, FL 34205-2130

D. DOING BUSINESS UNDER A FICTITIOUS NAME: ( )

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

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

NAME: ROBERT B. MACDONALD

TITLE: CHAIRMAN

PHONE: 941-747-6108

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 CANCELED PAY TELEPHONE CERTIFICATES.

YES-

HOWEVER, THE OFFICERS OF RMAC COMMUNICATIONS INC OWNED ALL OF THE STOCK OF CARWEL, INC. (SEE CERTIFICATE #2250, DOCKET NO. 890302, ORDER NO. 20935, RMAC REPRESENTS A RE ORGANIZATION)

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

CARWEL, INC. #2250

# FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

8. LIST THE STATES IN WHICH THE APPLICANT:

A. IS CURRENTLY PROVIDING PAY TELEPHONE SERVICE.

RNAL COMMUNICATIONS IS A CORPORATION FORMED IN A RE ORGANIZATION  
AND SUCCEEDING CARWEL, INC WHICH OPERATES PAY TELEPHONES  
IN FLORIDA - CARWEL, INC WILL TERMINATE IT'S CERTIFICATE WHEN  
R.M.A.C. RECEIVES CERTIFICATION.

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.

None

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

N/A

# FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

10. PLEASE CHECK ✓ THE SERVICES THAT WILL BE PROVIDED:

LOCAL	<input checked="" type="checkbox"/>
LONG DISTANCE	<input checked="" type="checkbox"/>
COIN	<input checked="" type="checkbox"/>
CALLING CARD	<input checked="" type="checkbox"/>
CREDIT CARD	<input checked="" type="checkbox"/>
OTHER, DESCRIBE	<input type="checkbox"/>

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11. PROPOSED NUMBER OF PAY TELEPHONE INSTRUMENTS THE APPLICANT PLANS TO PLACE IN THE FIRST YEAR: 55 E2

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

PERSONALLY	<input checked="" type="checkbox"/>
FULL-TIME TECHNICIAN	<input type="checkbox"/>
PART-TIME TECHNICIAN	<input type="checkbox"/>
SERVICE/REPAIR/MAINTENANCE CONTRACT	<input type="checkbox"/>
OTHER DESCRIBE	<input type="checkbox"/>

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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

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## FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

14. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL CONFORM TO SUBSECTIONS 4.29.2 - 4.29.4 and - 4.29.8 OF THE AMERICAN NATIONAL STANDARD SPECIFICATIONS FOR MAKING BUILDINGS AND FACILITIES ACCESSIBLE AND USABLE BY PHYSICALLY HANDICAPPED PEOPLE (ATTACHMENT F ANSI STANDARDS) (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. 837.08, 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.

*Robert B Macdonald*

\_\_\_\_\_  
(SIGNATURE OF OWNER/CHIEF OFFICER OF APPLICANT)

DATE: 02/04/98

**APPLICANT ACKNOWLEDGMENT FORM**

Applicant RMAC COMMUNICATIONS, INC

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

Signature: Robert S MacDonald

Title: Chairman

Date: 02/04/98

**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.**

01/14/98



Florida Department of Revenue  
**Certificate of Registration**

Issued Pursuant to Chapter 212, Florida Statutes

This Certificate is  
 Non-transferable.

DR-11  
 R. 12/97

Registration  
 Effective Date  
 12/26/97

Opening Date  
 01/01/98

Certificate Number  
 51-02-046689-14-7

Refer To This Number  
 When Reporting Tax

**This Certifies That**

CUSTOM COMMUNICATIONS  
 RMAC COMMUNICATIONS, INC  
 3506 23RD AV W  
 BRADENTON FL 34205

**Is Hereby Authorized and Empowered to Collect Sales  
 and Use Taxes For The State of Florida.**

**THIS CERTIFICATE MUST BE POSTED IN A CONSPICUOUS PLACE.**



Florida Department of Revenue

**Sales Tax Facts to Remember**

DR-11  
 R. 12/97

1. Every person conducting business in the State of Florida who is subject to sales and use tax is responsible for filing a "Sales and Use Tax Return" at the end of each assigned collection period
2. In the event that your preprinted sales tax return does not arrive in the mail, it is your responsibility to contact the Florida Department of Revenue and request that a form be sent to you.
3. Your sales tax return is due the 1st of the month following the collection period and late after the 20th. Example: For the collection period ending March 31, the tax return is due on April 1 and late after April 20 (Returns postmarked on the 20th are not considered late.) When the 20th falls on a Saturday, Sunday, or a state or federal holiday, your return must be postmarked on the first working day following the 20th.
4. If your return is filed timely, you are entitled to the specified collection allowance as your commission. If your return is filed late, you lose the collection allowance and will be charged a penalty and interest.
5. You must register each location from which you do business and file a return for each location unless the Department has approved reporting in another manner.
6. You are required to file a return even though you may have no sales tax to report. Late filing of a "zero sales" return will result in a penalty assessment.
7. It is your responsibility to notify the Florida Department of Revenue if you have any changes in your business (new location, mailing address, incorporation, change of partner in partnership, etc.).
8. In the event that your business is sold or closed, the law requires you to pay all taxes, penalty and/or interest due within 15 days. A final return form is included in the sales tax coupon book.
9. You may extend your sales tax number to your suppliers when making purchases of items that will be resold incorporated into an item of tangible personal property for sale, or exclusively rented as tangible personal property. All other purchases are taxable.
10. When accepting a tax number from another dealer instead of charging sales tax, you must keep on file a "Resale Certificate" which includes: business name, location address, reason for exempt purchase, signature of authorized agent, and tax number. Resale certificates are available at a nominal cost from your local office supply store, or if you prefer, you may have your printer prepare a form for your use. (The Department has a suggested format available upon request.)

Please contact your local Florida Department of Revenue Service Center if you require additional information or assistance regarding Florida Sales and Use Tax.



**ARTICLES OF INCORPORATION**

OF

**PMAC COMMUNICATIONS, INC.**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

97 DEC -3 AM 10:39

The undersigned natural persons, subscribers of these Articles of Incorporation, do hereby organize and associate themselves with the intention of forming a corporation for profit under the laws of the State of Florida, and hereby adopt the following Articles of Incorporation, in accordance with Florida Statute 607.0202 for such corporation.

**ARTICLE I - NAME**

The name of this corporation is **PMAC COMMUNICATIONS, INC.**

**ARTICLE II - PURPOSE**

This corporation shall have perpetual existence, commencing on the date of filing of these articles of Incorporation by the Secretary of State.

**ARTICLE III - PURPOSES**

The corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida including all kinds of securities.

**ARTICLE IV - CAPITAL STOCK**

The maximum number of shares of stock that this corporation is authorized to have outstanding at any time is seventy-five hundred (7,500) shares of voting common stock, each share having the par value of One Dollar (\$1.00) per share.

**ARTICLE V - INITIAL REGISTERED AGENT**

In accordance with Florida Statutes 607.0501 and 607.0805, Robert B. MacDonald, is named as Registered Agent of PMAC COMMUNICATIONS, INC. to accept service of process within the state, and having been so named to accept said service, hereby agrees to act in such capacity. The address of the Registered Agent is 3506 23<sup>rd</sup> Avenue West, Bradenton, FL 34205.

*Robert B. MacDonald*  
Robert B. MacDonald

**ARTICLE VI - PRINCIPAL OFFICE**

The street address of the initial principal office of this corporation in the State of Florida is 3506 23<sup>rd</sup> Avenue West, Bradenton, Florida 34205. The mailing address is PO Box 1611, Bradenton, Florida 34206-1611. The Board of Directors may from time to time move the principal office to any other address in Florida. The corporation may maintain offices and transact business in such other places within or without the State of Florida as may be designated by the Board of Directors.

**ARTICLE VII - INITIAL BOARD OF DIRECTORS**

The number of directors constituting the initial Board of Directors is two (2). The number of directors of succeeding Board of Directors may be increased or diminished from time to time, as provided in the by-laws adopted by the stockholders, but never less than one.

**NAME**

**ADDRESS**

**CITY AND STATE**

Robert J. MacDonald  
Robert B. MacDonald

4215 1<sup>st</sup> Avenue East  
3506 23<sup>rd</sup> Avenue West

Bradenton, FL 34208  
Bradenton, FL 34205

**ARTICLE VIII - INCORPORATORS**

We, the undersigned subscribing incorporators, have hereunto set our hands and seals this 30<sup>th</sup> day of November 1997, for the purposes of forming this corporation under the laws of the State of Florida, and I hereby make, subscribe, acknowledge, and file in the office of the Secretary of State of the State of Florida, these Articles of Incorporation and certify that the facts herein stated are true.

<u>NAME</u>	<u>ADDRESS</u>	<u>CITY AND STATE</u>
Robert J. MacDonald	4215 1 <sup>st</sup> Avenue East	Bradenton, FL 34208
Robert B. MacDonald	3506 23 <sup>rd</sup> Avenue West	Bradenton, FL 34205

*Robert J. MacDonald* 11-20-97  
ROBERT J. MACDONALD

*Robert B. MacDonald* 11-10-97  
ROBERT B. MACDONALD

**ARTICLE IX - INDEMNIFICATION OF OFFICERS AND DIRECTORS**

Every current and former Director and Officer shall be indemnified by the corporation to the full extent permitted by law.

**ARTICLE X - AMENDMENT**

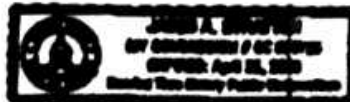
These Articles of Incorporation may be amended in the manner provided by law. These Articles of Incorporation may be altered, amended or repealed by resolution adopted by the Board of Directors setting forth the proposed amendment and directing that it be submitted to a vote at a meeting of the stockholders. The proposed amendment shall be adopted upon receiving the affirmative vote of the holders of the majority of the shares entitled to vote thereon. All of the Directors and all of the Shareholders may sign a written statement manifesting their intention that an amendment be adopted without the foregoing resolution and voting.

STATE OF FLORIDA  
COUNTY OF MANATEE

The foregoing instrument was acknowledged and sworn to before me this 30<sup>th</sup> day of November, 1997, by ROBERT J. MACDONALD and ROBERT B. MACDONALD, who is personally known to me or who has produced reasonably as identification and who did take an oath.

*[Signature]*  
NOTARY PUBLIC

MY COMMISSION EXPIRES:



26224-TC  
98 FEB 15  
RECEIVED  
MAIL ROOM

DEPOSIT DATE  
D709 • FEB 11 1998

ATTACHMENT B

# FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

- LEGAL NAME OF THE APPLICANT RMAC COMMUNICATIONS, Inc
- NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS  
SAME / DBA CUSTOM COMMUNICATIONS
- ADDRESS OF THE APPLICANT(S)  
PHYSICAL STREET 3506 23<sup>RD</sup> AVE. WEST CITY BRADENTON STATE & ZIP CODE FL 34205  
MAILING P.O. BOX 1611 CITY BRADENTON STATE & ZIP CODE FL 34206-1611
- TYPE OF ORGANIZATION (CHECK ONE) 
  - INDIVIDUAL DOING BUSINESS UNDER HIS/HER OWN NAME: ( )  
DOCUMENTATION: No other documentation needed.
  - PARTNERSHIP: ( )  
DOCUMENTATION: Attach a copy of the partnership agreement, and a list with the name and address of all partners.

RMAC COMMUNICATIONS, INC.  
D/B/A CUSTOM COMMUNICATIONS  
PHONE (941) 747-6108 FAX (941) 362-7900  
P.O. BOX 1611  
BRADENTON, FL 34206-1611

AMERICAN BANK OF BRADENTON  
BRADENTON, FL 34210

18082

02/04/98

PAY TO THE ORDER OF Florida Public Service Commission

\$ 100.00

One Hundred and 00/100.....

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

DOLLARS  
Security features include Details on back

DOCUMENT NUMBER - DATE

02091 FEB 11 98

VOID AFTER 60 DAYS

*Robert J. MacDonald*

MEMO

FPC-RECORDS/REPORTING