REQUEST TO ESTABLISH DOCKET (Please Type)							
Date:	3/20/2006		Docket No.:	060263-TI			
	·	Division Of Competitive M	1				
1. Division Name/Staff Name: Division Of Competitive Man				5111011015101			
	. OPR: Division Of The Commission Clerk And Administrative Services						
	3. OCR: Office Of The General Counsel						
4. Sugge:		cknowledgment of cancella fective March 9, 2006.	tion of IXC Reg	istration No. Tl072 by TTE of Maryland, Inc.,			
А. В.	A. Provide NAMES OR ACRONYMS ONLY if a regulated company.						
		· · · · · · · · · · · · · · · · · · ·					

	······································						
2	. Interested persons	and their representatives	(if any):				
			<u> </u>				
			<u> </u>				
6. Check	one:						
	□ Documentat	ion is attached.					
	☐ Documentat	ion will be provided with	recommendatio	on.			
				DOCUMENT NUMBER-DATE			

STATE OF FLORIDA

COMMISSIONERS: LISA POLAK EDGAR, CHAIRMAN J. TERRY DEASON ISILIO ARRIAGA MATTHEW M. CARTER II KATRINA J. TEW



Division of Competitive Markets & Enforcement Beth W. Salak Director (850) 413-6600

Hublic Service Commission

March 20, 2006

Mr. Ken Wood, President TTE of Maryland, Inc. (TI072) PO Drawer 1098 Columbia, MD 21044

Dear Mr. Wood:

On March 9, 2006, the Commission received your letter dated March 6, 2006, requesting cancellation of the company's IXC registration and tariff because the company is no longer in business as of June 1, 2005. As information, there are two types of cancellation, one is voluntary, which is granted if a company leaves in good standing and does not owe any fees. The other is involuntary, which is when a registration is cancelled on the Commission's own motion for violation of a rule, order, or statute.

The Regulatory Assessment Fee is owed if a registration is active during any portion of a calendar year. Unfortunately, since the Commission was not notified in writing in 2005 to cancel the registration, the 2006 Regulatory Assessment Fee is also applicable (there is a \$50 minimum annual fee even if a company never started operations or had any revenues). Our rules provide that a company must pay any past due and the current year's fee at the time it requests cancellation. In this case, the company owes the 2005 fee plus late payment charges and the 2006 fee. The Regulatory Assessment Fee return forms for both years are enclosed. If the company owes the minimum amount, the total due is \$106 (\$56 for 2005 and \$50 for 2006).

Therefore, before staff can recommend a voluntary cancellation, the company needs to comply with the cancellation rule. Please use the enclosed blue envelope, which will insure prompt processing.

Please review this information and respond by April 10, 2006. In the meantime, if you have any questions, just let me know. I can be reached at (850) 413-6502-phone, (850) 413-6503-fax, by internet e-mail at PIsler@psc.state.fl.us, or at the address below.

Sincerely,

Paula J. Isler

Bureau of Telecommunications Service Quality,

Certification and Enforcement

Saula J. Ale

Enclosures

Interexchange Company Regulatory Assessment Fee Return

FOR PSC USE ONLY

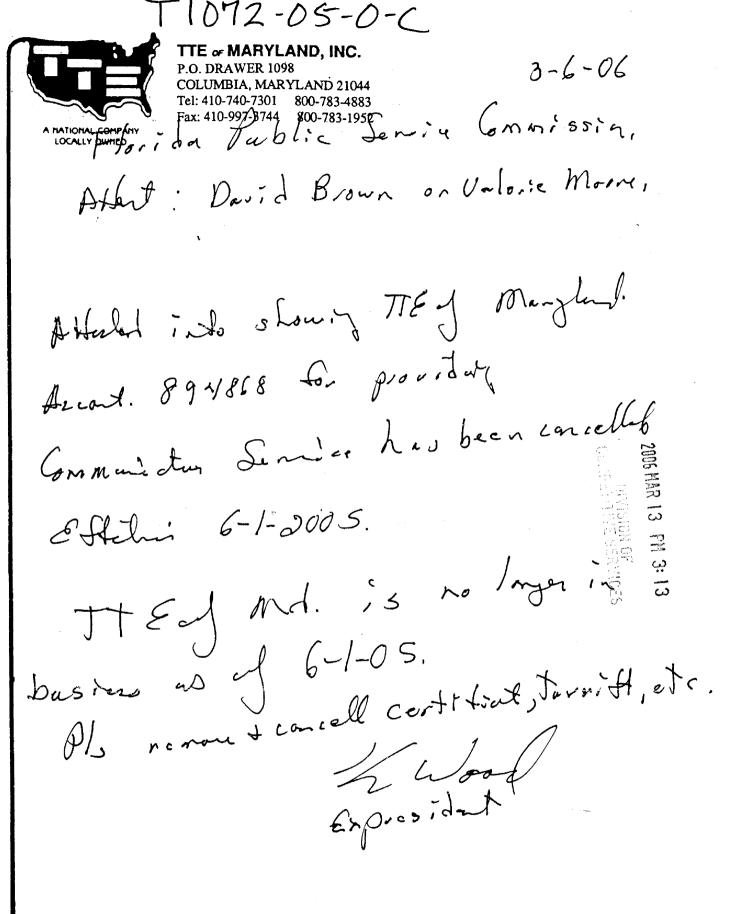
		Flo	rida Public Servi	ce Commi	ission	FOR PSC	USE ONLY	
STATU	S: ·	•	(See Filing Instructions o	n Back of Form)		Check #		
Act	ual Return	TI072-05-0)-R			\$	06-03-001	
Estimated Return TTE of		TTE of Ma	ryland, Inc.			003001		
		PO Drawer	1098			\$ P		
PERIOD COVERED:			MD 21044			06-03-001		
							004011	
01/01/2005 TO 12/31/2005 Request		Request for	r cancellation (Is	ler)		\$	I	
		•	•	,				
						Postmark Date Initials of Preparer		
		Please Com	plete Below If Official N	Iailing Addres	ss Has Changed			
	(Name of Company)		(Addr	ess)		(City/State)	(Zip)	
LINE			· · · · · · · · · · · · · · · · · · ·		FLORID	A GROSS		
NO.	ACC	OUNT CLASSIFICA	ATION				STATE REVENUE	
1.	Long Distance Services				\$	\$		
2. 3.	Access Services Private Line Services				····		<u> </u>	
4.	Leased Facilities & Circ	cuits Services						
5.	Miscellaneous Services							
6.	TOTAL Telephone Se	rvices			\$	\$		
7.	LESS: Amounts Paid to	Telecommunication	s Companies ⁽¹⁾		() ()	
8.	TOTAL REVENUES	For Regulatory Asse	Assessment Fee Calculation		\$			
9.	Regulatory Assessment							
9. 10.			File by Due Date" on ba	ck)				
11.		•	File by Due Date" on bac	k)				
12.	Extension Payment Fee	(see "4. Extension"	on back)			 		
13.	TOTAL AMOUNT D	UE (\$50 MINIMUM	1)			\$	(2)	
	(1) These amounts mus	st be intrastate only a	nd must be verifiable (see	e "2. Fees" on b	pack).			
	(2) Regardless of the g Section 364.336, F	ross operating reven	ue of a company, a mini	mum annual re	gulatory assessmer	nt fee of \$50 shall be impose	d as provided in	
	Section 504.550, 11	orida Statutes.			<u> </u>		:	
() Facil	itian Danad Camian		CURRENT COI	MPANY STAT		_		
	ities-Based Carrier nate-Operator Service	() Reseller) Rebiller	() Call Aggregator) Other:			
	***************************************	·	DILL INC IN	FORMATION	. 			
Complete	below if billing agent is oth	ner than yourself.	BILLING IN	FURIVIATIO	•			
	<u> </u>		(4.1	1 G: /G:	. /51	()		
What is th	(Name) te total amount of customer	deposits collected?	(Ad	dress: City/Sta		(Telephone) ne total amount of bond held	(if applicable)?	
Amount	: \$fo	r 20					es:	
			COMPANY II	NFORMATIO)N			
Do you le	ase telecommunications' fa	cilities? () YES	() NO					
If YES, w	ho do you lease these facili	ties from? Name:						
Address:				······································				
7.4	1	C 1	.1	1 6		4 1 . 6 . 1 . 1 1	11 2 6 4 1	
						the best of my knowledge knowingly makes a false stat		
	to mislead a public servant							
	(Signature of Compa	nny Official)		(Title)		(Date)	
			Telephone 1	Number ()	Fax Number ()	
()	Preparer of Form - Ple	ase Print Name)					<u></u>	
			F.E.I. No.					

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/2007

Interexchange Company Regulatory Assessment Fee Return

FOR PSC USE ONLY

	Flor	rida Public Servi	ce Commission	FOR PSC	USE ONLY
STATUS:		(See Filing Instructions o		Check #	
Actual Return	TI072-06-0			\$	
Estimated Return	TTE of Ma	ryland, Inc.			003001
Amended Return	PO Drawer	1098		\$	P
	Columbia,	MD 21044			 06-03-001
PERIOD COVERED:	1.				004011
01/01/2006 TO 12/31/2006	Request for	cancellation (Is	ler)	\$	I
	1	(20)		
				Postmark Date	
	Please Comp	lete Below If Official M	failing Address Has Changed	Initials of Preparer	
,	·			·	
					•
(Name of Compa	ny)	(Addre	ess)	(City/State)	(Zip)
INC			TI OD	VD + OPOOR	
LINÉ NO. A	ACCOUNT CLASSIFICA	TION		IDA GROSS ING REVENUE INTRAS	STATE REVENUE
Long Distance Serv			\$		
2. Access Services					
 Private Line Servic Leased Facilities & 			- · · · · · · ·		
5. Miscellaneous Serv			***************************************		
6. TOTAL Telephon	e Services		\$		
-	id to Telecommunications	Companies(I)			
*		-	(· · · · · · · · · · · · · · · · · · ·)
8. TOTAL REVENU	JES For Regulatory Asses	sment Fee Calculation		\$	
	ment Fee Due (Multiply L		• >		
	yment (see "3. Failure to yment (see "3. Failure to)				
	Fee (see "4. Extension" of		,,,,		
13. TOTAL AMOUN	T DUE (\$50 MINIMUM)		\$	(2)
		•		· · · · · · · · · · · · · · · · · · ·	
	must be intrastate only ar			nent fee of \$50 shall be impose	d ac provided in
Section 364.33	6, Florida Statutes.	ie of a company, a milini	main aimaa regulatory assessi	nent ice of \$50 shall be impose	d as provided in
		CITE DE LA COL			
() Facilities-Based Carrier	() Reseller	MPANY STATUS	to.	
() Alternate-Operator Service	() Rebiller	() Call Aggrega () Other:	ttor	
			FORMATION		
Complete below if billing agent i	is other than yourself	BILLING IN	FORMATION		
Complete below it offining agent i	s other than yourself.			()	
(Name)	mor deposits collected?	(Ad	dress: City/State/Zip)	(Telephone)	(:C):1-1-10
What is the total amount of custo Amount: \$				s the total amount of bond held (unt: \$ Expire	is applicable)?
				•	
Do you longs tologogy	of facilities? () VES		NFORMATION		
Do you lease telecommunication If YES, who do you lease these f		() NO			
I, the undersigned owner/of	fficer of the above-name	d company, have read t	he foregoing and declare that	to the best of my knowledge	and belief the above
information is a true and correct the intent to mislead a public serv					ement in writing with
the litteric to misieud a public ser	an in the performance of	mo nor duty onan oo gar	ney of a finademeanor of the se	cona acgree.	
(Signature of Co	mnany Official)		(Title)		(Date)
(Signature of CO	inputty Official)		• •		(Date)
/D	Dlagge Duind Niger	Telephone 1	Number ()	Fax Number ()
(Preparer of Form -	ricase rriat (Name)	F.E.I. No.			
		110.			





Rymul 3-6-06

COMMISSIONERS: LISA POLAK EDGAR, CHAIRMAN J. TERRY DEASON ISILIO ARRIAGA MATTHEW M. CARTER II KATRINA J. TEW



GENERAL COUNSEL RICHARD D. MELSON (850) 413-6248

Hublic Service Commission

February 22, 2006

DELINQUENCY NOTICE - CERTIFIED MAIL

TI072-05-0-12-C TTE of Maryland, Inc. P. O. Drawer 1098 Columbia, MD 21044-0098

Dear Certificate/Registration Holder:

The purpose of this letter is to inform you that the Commission has not received the 2005 Regulatory Assessment Fee (RAF) return and payment. As required by Section 364.336, Florida Statutes, and Rule 25-4.0161, Florida Administrative Code (F.A.C.), you were mailed a RAF return form on December 15, 2005, and payment was due on January 30, 2006.

Because you are delinquent in payment, in addition to the RAF, which is 0.0020 of a company's intrastate revenues or a minimum fee of \$50, whichever is greater, the company must now pay late payment charges. The late payment charges, consisting of interest and penalty, are outlined on the reverse side of the RAF return form. If you have misplaced or require a copy of the 2005 RAF return form, please contact David Brown or Valorie Moore at the numbers listed below or via e-mail.

If payment is not postmarked within 15 calendar days of receipt of this notice, as evidenced by the certified mail reciept, Rule 25-4.0161, F.A.C., automatically imposes a penalty of \$500, \$1,000, or \$2,000, in addition to the interest and penalty listed in the preceding paragraph. The penalty is based on the number of prior dockets against a company for violation of the RAF rule. For example, if a company has no prior dockets and fails to pay in accordance with this notice, it automatically will be assessed a \$500 penalty. For one prior docket, it automatically will be assessed a \$1,000 penalty and for two, a \$2,000 penalty. For a third docket, staff will submit a recommendation to the Commission seeking cancellation of the company's certificate or cancellation of its tariff and removal from the register.

Therefore, it is very important that you pay the 2005 Regulatory Assessment Fee plus late payment charges immediately. If you have any questions, please contact David Brown at (850) 413-6267 or Valorie Moore at (850) 413-6275 or via e-mail at dbrown@psc.state.fl.us or vmoore@psc.state.fl.us.

Sincerely,

Richard D. Melson General Counsel

cc:

Fiscal Services Section



FLORIDA DEPARTMENT OF REVENUE

February 09, 2006

: Communications Services Tax

Business Partner #: 894868 Contract Object # : 1031122

FEIN

: 52-1581421

TTE OF MARYLAND INC 11382 HIGH HAY DR **COLUMBIA MD 21044-1029**

Dear Madam or Sir:

We received your recent inquiry regarding the above referenced account. After reviewing your account the following adjustments have been made:

[] The Notice of Tax Action for return period has been canceled in full.
[] The Notice of Delinquency for return period has been canceled in ful
[] Your filing frequency has been changed to effective
[X] Your account has been canceled/inactivated effective <u>06/01/2005</u> .
[] Your opening date has been changed to
[] Your payment for has been located for return period
[] Other:

1-(800)352-3671

Taxpayer Services Florida Department of Revenue 5050 West Tennessee Street Tallahassee FL 32399-0100 800-352-3671

COMPANY IDENTIFICATION

Printed on 03/16/2006 at 12:25:18 by PJI

Complete Name: TTE of Maryland, Inc.

Mailing Name: TTE of Maryland, Inc.

Company Code: TI072 FEID Number: 52-1581421

RAF ACCOUNT FOR THE PERIOD 01/01/2005 THROUGH 12/31/2005

Req. Date:

09/15/1992

Inactive Date:

Service:

IXC - Interexchange Telephone

Received:

No RAF Form

Status:

Pending

Amended:

No

Extension:

No

Frozen:

No

Comments:

No

Payment Count: 0 Payments Made to Date

Operating Rev:

\$0.00

Interstate Rev:

\$0.00

RAF Rate:

Net RAF Due:

\$0.00

Assessment	Due	Paid	Owe	
RAF	\$0.00	\$0.00	\$0.00	
Penalty	\$0.00	\$0.00	\$0.00	
Interest	\$0.00	\$0.00	\$0.00	
Extension Fee	\$0.00	\$0.00	\$0.00	
Total	\$0.00	\$0.00	\$0.00	

Last modification was made on Thursday, December 1, 2005 at 9:10 AM by David Brown

TTE OF MARYLAND, INC. (T1072)

Industry: Telecommunications, Service provided: IXC Company type: Interexchange Telephone Companies Regulation date: 09/15/1992, Inactive date:

Certificate number: N/A, County: Company liaison: Ken Wood, President

Mailing address:

Location address:

P. O. Drawer 1098

E-mail address:

11382 High Hay Drive Columbia, MD 21044-1029

Columbia, MD 21044-0098

Web site:

Phone number: (410) 740-7301

Fax number: (410) 997-3744

Operating rev: \$0.00 Interstate rev: RAF rate: \$0.00

Documents: Delinquent letter mailed on 02/22/2006

Period covered: 01/01/2005 through 12/31/2005

RAF form mailed on 12/01/2005

MCD Company Information for TI072

Printed on 03/20/2006 at 13:53:10 by PJI

Company Code: Complete Name: Mailing Name: Certificate No(s): Status:

TI072 TTE of Maryland, Inc. TTE of Maryland, Inc. N/A Active 09/15/1992

No

Regulation Date:
Bankruptcy:
Company Liaison #1:
Title:

Ken Wood President

Mailing Address:

P. O. Drawer 1098

Columbia, MD 21044-0098

Physical Location:

11382 High Hay Drive

Phone: Fax:

Columbia, MD 21044-1029 (410) 740-7301 (410) 997-3744

Related Dockets:

920571-TI

Application for certificate to provide interexchange telecommunications service by TTE OF MARYLAND, INC.