

080153

Interexchange Company Regulatory Assessment Fee Return

Florida Public Service Commission

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
06/07/2007 TO 12/31/2007

*Paula +
Records*

(See Filing Instructions on Back of Form)

TK150-07-0-R
Ecomony Telephone, Inc.
6725 Convoy Court
San Diego, CA 92111-1010

DEPOSIT DATE
830 MAR 18 2008

Please Complete Below If Official Mailing Address Has Changed

FOR PSC USE ONLY

Check # 6428

\$ 700.00 06-03-001 003001

\$ _____ E

\$ _____ P 06-03-001 004011

\$ _____ I

Postmark Date 3-13-08

Initials of Preparer RT

(Name of Company) _____ (Address) _____ (City/State) _____ (Zip) _____

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE	
1.	Long Distance Services	\$ _____	\$ _____	
2.	Access Services	_____	_____	
3.	Private Line Services	_____	_____	
4.	Leased Facilities & Circuits Services	_____	_____	
5.	Miscellaneous Services	_____	_____	
6.	TOTAL Telephone Services	\$ <u>0</u>	\$ <u>0</u>	
7.	LESS: Amounts Paid to Telecommunications Companies ⁽¹⁾	(_____)	(_____)	
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation		\$ <u>0</u>	CMP _____
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0020)		<u>0</u>	COM _____
10.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)		<u>0</u>	CTR _____
11.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)		<u>0</u>	ECR _____
12.	Extension Payment Fee (see "4. Extension" on back)		<u>0</u>	GCL _____
13.	TOTAL AMOUNT DUE (\$700.00 MINIMUM)		\$ <u>700.00</u>	QPC _____

(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] General Manager 3/13/08
(Signature of Company Official) (Title) (Date)

Stan Patterson Telephone Number 858 279 5257 Fax Number 858 279 6179
(Preparer of Form - Please Print Name)

F.E.I. No. _____

01969 MAR 17 8

FPSC-COMMISSION CLERK

Economy Telephone, Inc.

March 5, 2008

Florida Public Services Commission
Attn: Fiscal Services
2540 Shumard Oak Boulevard
Tallahassee FL 32399-0850

Re: Deactivate TK150-07-0-R

Dear Sir or Madam:

This letter is to request that Economy Telephone, Inc.'s status in the Florida Public Service Commission be deactivated for 2008.

If you need further information please contact the general manager Tom Williams at (858) 279-5657 or tom@economytelephone.com.

Thank you,

A handwritten signature in black ink, appearing to read 'Tom Williams', written in a cursive style.

Tom Williams
General Manager