



Sandra A. Khazraee
Regulatory/Government Affairs
Southern Region

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Tallahassee, FL 32301-1872
Tel: 850.847.0173

December 9, 2009

090534 - TA

COMMISSION
CLERK

09 DEC - 9 PM 12: 14

RECEIVED-FPSC

Ms. Ann Cole
Office of Commission Clerk
Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, FL 32399-0850

RE: Voluntary Cancellation of Alternative Access Vendor (AAV) Certificate No. 4063 for Gulf Long Distance, Inc. (Company Code TA033)

Dear Ms. Cole:

In accordance with Rule 25-24.735(2) Florida Administrative Code, this letter is to request that the Florida AAV Certificate No. 4063 issued to Gulf Long Distance, Inc. (company No. TA033) be cancelled effective immediately. Gulf Long Distance, Inc. has no AAV customers. Therefore, no customers will be affected by this voluntary cancellation.

Enclosed with this letter is a copy of the 2009 Regulatory Assessment Fee (RAF) return for Gulf Long Distance, Inc and a check in the amount of \$ 1300.01 to cover the \$600 in RAF fees due for this certificate and \$701.00 in RAF fees due for the Gulf Long Distance IXC registration which is also being cancelled at this time.

Please address any questions or correspondence to me.

Sincerely,

Sandra A. Khazraee

Sandra A. Khazraee

cc: Susan S. Masterton

COM ___
APA ___
ECR ___
GCL ___
RAD ___
SSC ___
ADM ___
OPC ___
CLK None

DOCUMENT NUMBER - DATE

11836 DEC-9 8

FPSC-COMMISSION CLERK

Alternative Access Vendor Regulatory Assessment Fee Return

Florida Public Service Commission

STATUS:

(See Filing Instructions on Back of Form)

- Actual Return
- Estimated Return
- Amended Return

TA033-09-0-R
 Gulf Long Distance, Inc.
 Attn: Subsidiary Accounting
 100 CenturyTel Drive
 Monroe, LA 71203-2041

Please Complete Below If Official Mailing Address Has Changed

FOR PSC USE ONLY

Check # _____
 \$ _____ 06-03-001
 _____ 003001
 \$ _____ E
 \$ _____ P 06-03-001
 \$ _____ I 004011
 Postmark Date _____
 Initials of Preparer _____

PERIOD COVERED:
 01/01/2009 TO 12/31/2009

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

LINE NO.	WIDE AREA TOLL SERVICES	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Special Access Services	\$ <u>0</u>	\$ <u>0</u>
2.	Private Line Services	_____	_____
3.	Leased Facilities & Circuits Services	_____	_____
4.	Miscellaneous Services	_____	_____
5.	TOTAL REVENUES	_____	\$ _____
6.	LESS: Amounts Paid to Other Telecommunications Companies ⁽¹⁾	_____	_____
7.	NET INTRASTATE OPERATING REVENUE for Regulatory Assessment Fee Calculation (Line 5 less Line 6)	_____	\$ <u>0</u>
8.	Regulatory Assessment Fee Due (Multiply Line 7 by 0.0020)	_____	_____
9.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____	_____
10.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____	_____
11.	Extension Payment Fee (see "4. Extension " on back)	_____	_____
12.	TOTAL AMOUNT DUE (\$600.00 MINIMUM)	_____	\$ <u>600</u> ⁽²⁾

(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 \$600 shall be imposed as provided in Section 364.336, Florida Statutes.

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 official duty shall be guilty of a misdemeanor of the second degree.

Lori Austin (Signature of Company Official) Manager, Subsidiary Acctg. (Title) 12/1/09 (Date)

Miranda M. Russ (Preparer of Form - Please Print Name) Telephone Number (318) 388-9130 Fax Number (318) 388-9991

F.E.I. No. 63-1026817

DOCUMENT NUMBER - DATE
 111836 DEC-99

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