



January 13, 2026

Commission Clerk
Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, FL 32399-085

RE: Annual Lifeline Certification – Form 555

Attached please find a copy of the Annual Lifeline Eligible Telecommunications Carrier Certification Forms (FCC Form 555) for Consolidated Communications of Florida Company, which was filed with the Universal Service Administrative Company as well as with the Federal Communications Commission. Included are forms for Florala, Perry, and Port St. Joe study areas.

Please contact me at beth.westman@fidium.com with any questions or concerns regarding this filing.

Sincerely,

A handwritten signature in black ink, appearing to read "Beth Westman".

Beth Westman
Senior Regulatory Services Specialist
Consolidated Communications
beth.westman@fidium.com
207-535-4249

Annual Lifeline Eligible Telecommunications Carrier Certification Form All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

210291	143001433
Study Area Code (SAC)	Service Provider Identification Number (SPIN)
(An Eligible Telecommunications Carrier (ETC) must provide a certification form for each SAC that provides Lifeline service).	
2025	FL
Recertification Year	State
	Consolidated Communications of Florida Company, LLC
	ETC Name
	SEARCHLIGHT 111 CVL, LLC
DBA, Marketing, or Other Branding Name	Holding Company Name
(If same as ETC name, list "N/A" Do <u>not</u> leave blank)	(If same as ETC name, list "N/A" Do <u>not</u> leave blank)

Does the reporting company have affiliated ETCs? Yes ☒ No ☐

Provide a list of all ETCs that are affiliated with the reporting ETC, using page 4 and additional sheets if necessary. Affiliation shall be determined in accordance with Section 3(2) of the Communications Act. That Section defines "affiliate" as "a person that (directly or indirectly) owns or controls, is owned or controlled by, or is under common ownership or control with, another person." 47 U.S.C. § 153(2). See also 47 C.F.R. § 76.1200.

Affiliated ETC's SAC	Affiliated ETC's Name
100004	Consolidated Communications of Maine Company
100015	Consolidated Communications of Maine Company
100025	Consolidated Communications of Maine Company
103313	Consolidated Communications of Maine Company
105111	Consolidated Communications of Northern New England Company
125113	Consolidated Communications of Northern New England Company
143331	Consolidated Communications of Northland Company, LLC
145115	Consolidated Communications of Vermont Company, LLC
150073	Berkshire Telephone Company
150078	Chautaucqua & Erie Telephone Corporation
150084	Taconic Telephone Corp
170145	Consolidated Communications of Pennsylvania Company, LLC
170185	Consolidated Communications of Pennsylvania Company, LLC
170193	Consolidated Communications of Pennsylvania Company, LLC
210329	Consolidated Communications of Florida Company, LLC
210339	Consolidated Communications of Florida Company, LLC
341004	Consolidated Communications of Central Illinois Company, LLC

341009	Consolidated Communications of Central Illinois Company, LLC
341037	Consolidated Communications of Illinois Company, LLC
341065	Consolidated Communications of Central Illinois Company, LLC
361375	Consolidated Communications of Minnesota Company, LLC
361427	Consolidated Communications of Minnesota Company, LLC
411835	Consolidated Communications of Kansas Company, LLC
421472	Consolidated Communications of Missouri Company, LLC
431981	Consolidated Communications of Oklahoma Company, LLC
442072	Consolidated Communications of Texas Company, LLC
442109	Consolidated Communications of Texas Company, LLC
461835	Consolidated Communications of Kansas Company, LLC
462192	Consolidated Communications of Colorado Company, LLC
462204	Consolidated Communications of Colorado Company, LLC
542334	Consolidated Communications of California Company, LLC
549012	Consolidated Communications Enterprise Services, LLC

Initial Certification *All ETCs must complete this section.*

I certify that the company listed above:

- Has policies and procedures in place to ensure that its Lifeline subscribers are eligible to receive Lifeline services; and
- Is in compliance with all federal Lifeline certification procedures; and
- Is in compliance with the minimum service levels set forth in 47 C.F.R. § 54.408.

I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial MJS

Annual Recertification Results

Report the results of recertification efforts for the current calendar year.

Do not leave blocks empty. If the National Verifier is responsible for conducting recertification, enter zero for blocks A - F. If the state Lifeline Administrator is responsible for conducting recertification, report the results for each block.

A. Subscribers eligible for recertification within current calendar year	
B. Subscribers de-enrolled prior to recertification attempts	
C. Total number of subscribers required to be recertified (A-B)	
D. Subscribers successfully recertified	
E. Subscribers de-enrolled for failed recertification	
F. Percentage de-enrolled for failed recertification (E/C)	

I certify that the company listed above has procedures in place to recertify consumer eligibility by relying upon notice of eligibility from: state Lifeline administrator X National Verifier

I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial MJS

No Subscribers Certification *Complete this section if ETC claimed no Lifeline subscribers.*

I certify that my company did not claim federal low income support for the current Form 555 data year. I am an officer of the company named above. I am authorized to make this certification for the SAC(s) listed on this form

Initial MJS

ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes ☐ No ☒

If yes, record the number of subscribers de-enrolled for non-usage by month in Block H below.

G	H
Month	Subscribers De-Enrolled for Non-Usage
January	
February	
March	
April	
May	
June	
July	
August	
September	
October	
November	
December	
Total Subscribers	0

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate by-laws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

Signature Block

By signing below, I certify that the information provided is true and accurate. I am an officer of the company named above. I am authorized to make this certification for this SAC.

Signed,

Michael Shultz

Signature of Officer

michael.shultz@consolidated.com

Email Address of Officer

Robert Tice

Person Completing This Certification Form

Michael Shultz - Vice President

Printed Name and Title of Officer

01-02-2026

Date

9135683326

Contact Phone Number

Annual Lifeline Eligible Telecommunications Carrier Certification Form All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

210329	143001436
Study Area Code (SAC)	Service Provider Identification Number (SPIN)
(An Eligible Telecommunications Carrier (ETC) must provide a certification form for each SAC that provides Lifeline service).	
2025	FL
Recertification Year	State
	Consolidated Communications of Florida Company, LLC
	ETC Name
	SEARCHLIGHT 111 CVL, LLC
DBA, Marketing, or Other Branding Name	Holding Company Name
(If same as ETC name, list "N/A" Do <u>not</u> leave blank)	(If same as ETC name, list "N/A" Do <u>not</u> leave blank)

Does the reporting company have affiliated ETCs? Yes ☒ No ☐

Provide a list of all ETCs that are affiliated with the reporting ETC, using page 4 and additional sheets if necessary. Affiliation shall be determined in accordance with Section 3(2) of the Communications Act. That Section defines "affiliate" as "a person that (directly or indirectly) owns or controls, is owned or controlled by, or is under common ownership or control with, another person." 47 U.S.C. § 153(2). See also 47 C.F.R. § 76.1200.

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150078	Chautaucqua & Erie Telephone Corporation
150084	Taconic Telephone Corp
170145	Consolidated Communications of Pennsylvania Company, LLC
170185	Consolidated Communications of Pennsylvania Company, LLC
170193	Consolidated Communications of Pennsylvania Company, LLC
210291	Consolidated Communications of Florida Company, LLC
210339	Consolidated Communications of Florida Company, LLC
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Initial Certification *All ETCs must complete this section.*

I certify that the company listed above:

- Has policies and procedures in place to ensure that its Lifeline subscribers are eligible to receive Lifeline services; and
- Is in compliance with all federal Lifeline certification procedures; and
- Is in compliance with the minimum service levels set forth in 47 C.F.R. § 54.408.

I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

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F. Percentage de-enrolled for failed recertification (E/C)	

I certify that the company listed above has procedures in place to recertify consumer eligibility by relying upon notice of eligibility from: state Lifeline administrator X National Verifier

I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial MJS

No Subscribers Certification *Complete this section if ETC claimed no Lifeline subscribers.*

I certify that my company did not claim federal low income support for the current Form 555 data year. I am an officer of the company named above. I am authorized to make this certification for the SAC(s) listed on this form

Initial MJS

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Is the ETC subject to the non-usage requirements? Yes ☐ No ☒

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Signature Block

By signing below, I certify that the information provided is true and accurate. I am an officer of the company named above. I am authorized to make this certification for this SAC.

Signed,

Michael Shultz

Signature of Officer

michael.shultz@consolidated.com

Email Address of Officer

Robert Tice

Person Completing This Certification Form

Michael Shultz - Vice President

Printed Name and Title of Officer

01-02-2026

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Initial MJS

No Subscribers Certification *Complete this section if ETC claimed no Lifeline subscribers.*

I certify that my company did not claim federal low income support for the current Form 555 data year. I am an officer of the company named above. I am authorized to make this certification for the SAC(s) listed on this form

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Signed,

Michael Shultz

Signature of Officer

michael.shultz@consolidated.com

Email Address of Officer

Robert Tice

Person Completing This Certification Form

Michael Shultz - Vice President

Printed Name and Title of Officer

01-02-2026

Date

9135683326

Contact Phone Number