

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/2001

Pay Telephone Service Provider Regulatory Assessment Fee Return

ORIGINAL

2000 + 2001 Raf

010000-PU

STATUS:

- Actual Return
- Estimated Return
- Amended Return

*P. Zisler
ROR*

Florida Public Service Commission

(See Filing Instructions on Back of Form)

TG706 MAR 29 PM 1:35
 West Flagler Associates, Ltd.
 P. O. Box 350940
 Miami, FL 33135-0940

DEPOSIT DATE
D047 * MAR 30 2001

FOR PSC USE ONLY
 Check# 27407 + 27408

\$ 100.00 0603002
 \$ 5.00 003001
 \$ 1.00 0603002
 004011

Postmark Date 3/19/01
 Initials of Preparer MC

PERIOD COVERED:
 06/16/2000 TO 12/31/2000

Please Complete Below If Official Mailing Address Has Changed

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

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ <u>0</u>
2.	Gross Intrastate Revenue	<u>0</u>
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	(<u>0</u>)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation	\$ <u>0</u>

WEST FLAGLER ASSOCIATES LTD.
 P.O. BOX 350940
 MIAMI, FL 33135-0940

TOTAL BANK
 NORTH MIAMI BRANCH
 MIAMI, FLORIDA 33181
 63-915-660

DATE 03-16-01

PAY **THE SUM 56 DOLS 00 CTS** DOLLARS \$ 56.00

TO THE **FLORIDA PUBLIC SERVICE COMMISSION**
 2540 SHURNARD OAK BLVD

27407

WEST FLAGLER ASSOCIATES LTD.
 P.O. BOX 350940
 MIAMI, FL 33135-0940

TOTAL
 NORTH MIAI
 MIAMI, FLOR
 63-915-660

DATE _____

PAY **THE SUM 50 DOLS 00 CTS** LARS \$ 50.00

TO THE **FLORIDA PUBLIC SERVI**
 2540 SHURNARD OAK BL
 TALLAHASSEE FL

DOCUMENT NUMBER-DATE
03936 MAR 30 01

FPSC-RECORDS/REPORTING

ACCOUNT
Hutchinson

27408

119.07(1)(z), Florida Statutes: Bank account numbers or debit, charge, or credit card numbers given to an agency for the purpose of payment of any fee or debt owing are confidential and exempt from subsection (1) and s.24(a), Art. 1 of the State Constitution

027408 00660

Fabulous Flagler

GREYHOUND TRACK

01 MAR 21 AM 8 59
MAIL ROOM

March 19, 2001

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

Attn: Mr. Frank Harrison

RECEIVED-FPSC
01 MAR 21 AM 9:44
RECORDS AND REPORTING

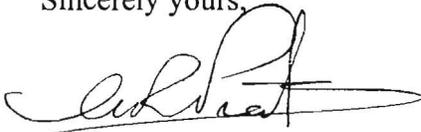
Dear Mr. Harrison:

Enclosed please find our Pay Telephone Service Provider regulatory assessment fee return for the year 2000 including penalty and interests in the total amount of \$56.00 paid by check.

Also, we are sending another check in the amount of \$50.00 to pay for the 2001 assessment fee and our request to cancel our license since we decided not to use it.

Should you require any additional information for the cancellation of our license, please do not hesitate to contact me.

Sincerely yours,



Armando R. Prats
Controller

- APP _____
- CAF _____
- CMP _____
- COM _____
- CTR _____
- ECR _____
- LEG _____
- OPC _____
- PAI _____
- RG0 _____
- SEC _____
- SER _____
- OTH _____

c: Ms. Nonnye Grant
Records & Reporting

ARP/mg

