**State of Florida** 



# RIGINAL

## Hublic Serbice Commission

CAPITAL CIRCLE OFFICE CENTER • 2540 SHUMARD OAK BOULEVARD TALLAHASSEE, FLORIDA 32399-0850

#### -M-E-M-O-R-A-N-D-U-M-

**DATE:** March 20, 2007

TO: Blanca S. Bayó, Commission Clerk and Administrative Services Director

FROM: Toni J. McCoy, Regulatory Analyst II, Division of Competitive Markets & M Enforcement

**RE:** Docket No. 070161-TI

Please add the attached revised IXC Registration and email cover from the company to the docket file.

Call 413-6532, if you have any questions.

PECEIVED STUSC

- CMP
- COM \_\_\_\_\_
- CTR \_\_\_\_\_
- ECR
- GCL
- OPC
- RCA
- SCR

SGA

SEC OTH N

DOCUMENT NUMBER-DATE 02494 MAR 21 5 FPSC-COMMISSION CI FRK

#### **Toni McCoy**

.

4

From:	Beverly Jackson [bjackson@wdcsn.net]
Sent:	Monday, March 19, 2007 4:00 PM
То:	Toni McCoy
Subject:	Corrections
• • • •	

Attachments: ixc\_registration\_form.rtf; ixctariffamended.rtf

Toni,

Here are the corrections to the IXC Application & Tariff. I will send CLEC information under separate email.

**Beverly Jackson** Vice President of Regulatory Affairs WinSonic Digital Cable System Networks, Ltd. 404-230-5705 Phone 404-230-5710 Facsimile \_\_\_\_

### IXC REGISTRATION FORM

Company Name WinSonic Digital Media Group, Ltd. Corp.		
Florida Secretary of State F	Registration No. F0600007070	
Fictitious Name(s) as filed at Fla. Sec. of State		
Company Mailing Name	WinSonic Digital Media Group, Ltd.	
Mailing Address	101 Marietta Street NW, Suite 2600	
	Atlanta, GA 30303	
Web Address	www.winsonic.net	
E-mail Address	winston@winsonic.net	
Physical Address	101 Marietta Street NW, Suite 2600	
	Atlanta, GA 30303	
Company Liaison	Winston D. Johnson	
Title	Chairman & CEO	
Phone	404-230-5705	
Fax	404-230-5710	
E-mail address	winston@winsonic.net	
Consumer Liaison to PSC	Beverly Jackson	
Title	Vice President of Regulatory Affairs	
Address	101 Marietta Street NW, Suite 2600, Atlanta, GA 30303	
Phone	404-230-5705	
Fax	404-230-5710	
E-mail address	bjackson@wdcsn.net	

My company's tariff as required in Section 364.04, Florida Statutes, is enclosed with this form. I understand that my company must notify the Commission of any changes to the above information pursuant to Section 364.02, Florida Statutes. My company will owe Regulatory Assessment Fees for each year or partial year my registration is active pursuant to Section 364.336, Florida Statutes. My company will comply with Section 364.603, Florida Statutes, concerning carrier selection requirements, and Section 3 64.604, Florida Statutes, concerning billing practices.

Winston D. Johnson

Signature of Company Representative

Printed/Typed Name of Representative

Date

Effective: