

RUTLEDGE, ECENIA & PURNELL
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11 JUL 29 PM 1:54

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July 29, 2011

CONFIDENTIAL DOCUMENTS ENCLOSED

110000-OT

VIA HAND DELIVERY

Ms. Ann Cole, Director
Division of the Commission Clerk and
Administrative Services
Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, FL 32399-0850

claim of confidentiality
 notice of intent
 request for confidentiality
 filed by OPC

For DN 05333-11, which
is in locked storage. You must be
authorized to view this DN.-CLK

Re: Northeast Florida Telephone Company's d/b/a NEFCOM Communications'
("NEFCOM") Interexchange Company Regulatory Assessment Fee Return

Dear Ms. Cole:

Pursuant to Section 364.336, Florida Statutes, enclosed please find NEFCOM Interexchange
Company Regulatory Assessment Fee Return for revenues from January 1, 2011 through June 30,
2011.

Pursuant to Section 364.183(1), Florida Statutes and Rule 25-22.006(5)(a), Florida
Administrative Code, NEFCOM hereby claims confidential treatment for certain portions of its
regulatory assessment fee return.

Enclosed herewith are the following:

- Attachment "A" - 2 copies of NEFCOM's Interexchange Company
Regulatory Assessment Fee Return with the specific information claimed to be confidential
redacted; and
- Attachment "B" - a sealed envelope marked 'CONFIDENTIAL' containing:
NEFCOM's Interexchange Company Regulatory Assessment Fee Return with the specific
information claimed to be confidential highlighted in yellow.

NEFCOM asserts that the portions of its response contain proprietary confidential business

XOM ___
APA ___
DCR ___
ECL I
RAD I
SSC ___
ADM ___
OPC ___
CLK I

DOCUMENT NUMBER - DATE

05332 JUL 29 =

FPSC-COMMISSION CLERK

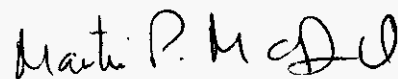
RUTLEDGE, ECENIA & PURNELL

information regarding NEFCOM's interexchange services. NEFCOM is currently experiencing competition from other service providers with respect to such service within NEFCOM's service territory.

Pursuant to section 364.183(1), Florida Statutes, upon the filing of NEFCOM's claim that such information is proprietary and confidential business information, such information shall be kept confidential and shall be exempt from section 119.07(1), F.S., and section 24(a), Art. I of the State Constitution. Pursuant to section 364.183(4), F.S., staff may retain this information for as long as is necessary for the Commission to conduct its business.

Please acknowledge receipt of this filing by stamping and initialing a copy of this letter and returning same to the courier. If you have any questions, please do not hesitate to call me. Thank you for your assistance with this filing.

Sincerely,

A handwritten signature in black ink that reads "Martin P. McDonnell". The signature is written in a cursive style with a large, stylized 'M' and 'D'.

Martin P. McDonnell

Enclosures

cc: Tammy Souza

Florida Public Service Commission

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
01/01/2011 TO 06/30/2011

(See Filing Instructions on Back of Form)

TI642-11-1-R
 NEFCOM Communications
 505 Plaza Circle, Suite 200
 Orange Park, FL 32073-9409

FOR PSC USE ONLY

Check # _____

\$ _____ 06-03-001
003001

\$ _____ E

\$ _____ P 06-03-001
004011

\$ _____ I

Postmark Date _____

Initials of Preparer _____

REDACTED

Please Complete Below If Official Mailing Address Has Changed

 (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 | \$ _____ | \$ _____ |
| 7. | LESS: Amounts Paid to Telecommunications Companies ⁽¹⁾ | (_____) | (_____) |
| 8. | TOTAL REVENUES For Regulatory Assessment Fee Calculation | _____ | \$ _____ |
| 9. | Regulatory Assessment Fee Due (Multiply Line 8 by 0.0020) | _____ | _____ |
| 10. | Penalty for Late Payment (see "3. Failure to File by Due Date" on back) | _____ | _____ |
| 11. | Interest for Late Payment (see "3. Failure to File by Due Date" on back) | _____ | _____ |
| 12. | Extension Payment Fee (see "4. Extension" on back) | _____ | _____ |
| 13. | TOTAL AMOUNT DUE (\$700.00 MINIMUM) | _____ | \$ _____ 700 ⁽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 \$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 of Company Official) VICE-PRESIDENT OF ADMINISTRATIVE SERVICES (Title) 07/25/2011 (Date)

VICKI R. COMBS Telephone Number 904-688-0037 Fax Number 904-688-0049
 (Preparer of Form - Please Print Name)

E.I. No. _____ DOCUMENT NUMBER-DATE
 59-3368556 05332 JUL 29 =

072114

07/26/2011

\$700.00

Invoice No.
NC072511

Date
07/25/2011

Payment Amount
\$700.00

Debit Memo Amt
\$0.00

State W/H Description
\$0.00 FLPCS REGULATORY ASS

REDACTED

TOWNES TELECOMMUNICATIONS SERVICES CORPORATION



TOWNES TELECOMMUNICATIONS
SERVICES CORPORATION
PO BOX 729 • LEWISVILLE, AR 71845

REDACTED

THE FIRST NATIONAL BANK
OF TOM BEAN, TEXAS

072114

CHECK NO.

DATE

07/26/2011

AMOUNT

\$700.00 **

PAY EXACTLY

Seven Hundred And 00/100

TO
THE
ORDER
OF

FLORIDA PUBLIC SERVICE COMMISSION
ATTN: FISCAL SERVICES
2540 SHUMAND OAK BLVD
TALLAHASSEE FL 32399-0580

TOWNES TELECOMMUNICATIONS SERVICES CORPORATION

AUTHORIZED SIGNATURE

⑈072114⑈

REDACTED

DOCUMENT NUMBER-DATE

05332 JUL 29 =

FPSC-COMMISSION CLERK