

Missouri Public Intellicall Operator Services, Inc. dba ILBervice Commission

Company Name

(Provide the full name of the company as certificated or registered with the Missouri Public Service Commission. Do not abbreviate; include any Commission approved d/b/a or fictitious name, if applicable.)

TELECOMMUNICATIONS COMPANY OR IVoIP PROVIDER ANNUAL REPORT TO THE

MISSOURI PUBLIC SERVICE COMMISSION

For the Calendar Year of January 1 - December 31, 2016

	elect how the company is certificated or registered with the Commission Company Name as shown above (check all that apply):
	Incumbent Local Telecommunications Company (not competitively classified ILEC)
	Incumbent Local Exchange Telecommunications Company (competitively classified ILEC)
	Competitive Local Exchange Telecommunications Company (CLEC)
X	Interexchange Telecommunications Company (IXC)
	Local Non-switched Telecommunications Provider (classified in EFIS as IXC)
	Interconnected Voice over Internet Protocol Service Provider (IVoIP)
that you r Informati	an one certificate or registration is held by the company then keep in mind must file an annual report in the Commission's Electronic Filing and on System (EFIS) based on each certificate or registration. In such situations, bate the annual reports to be identical; however please verify the following:
	The various annual reports filed in EFIS are identical.
	The various annual reports filed in EFIS are different.
	Not applicable (Company only has one certificate or registration; therefore only one annual report was filed in EFIS.)
Please ch	oose <u>one</u> of the following filing options to indicate the security level of the filing:
X	Public submission (NOT Proprietary or Highly Confidential)
	Non-Public submission (Highly Confidential or Proprietary) (See instructions for special requirements.)
Please revi	ew the instructions document on the previous page before proceeding.
Evcel Issue Dat	o: 12/16/2016 For use when filling under seal

850-971-5335 Telephone Number 503-961-9474 Fax Number mark@csilongwood.com E-Mail Address	t address) 32750 Zip	onte Vedra Beac Address Road erent from stree FL State	in full the company's information Sawgrass Village Cr., Ste. 2, Formal Company Stree 242 Rangelin The Company Mailing Address (if difformal Longwood City	5000 Sawgrass
Telephone Number 503-961-9474 Fax Number mark@csilongwood.com	1, FL 32082 t address) 32750 Zip Dox):	onte Vedra Beach Address e Road erent from stree FL State	Sawgrass Village Cr., Ste. 2, F Company Stree 242 Rangelin npany Mailing Address (if diff Longwood City Description	5000 Sawgrass
Telephone Number 503-961-9474 Fax Number mark@csilongwood.com	1, FL 32082 t address) 32750 Zip Dox):	onte Vedra Beach Address e Road erent from stree FL State	Sawgrass Village Cr., Ste. 2, F Company Stree 242 Rangelin npany Mailing Address (if diff Longwood City Description	5000 Sawgrass
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407-260-1011	pany	eparer for Com	Mark Lammert, CPA, Tax P	Mark Lai
Telephone Number			Name	
407-260-1033	0	wood, FL 3275	242 Rangeline Rd., Long	242 F
Fax Number		ess	Street Add	
mark@csilongwood.com	0	wood, FL 3275	242 Rangeline Rd., Long	242 F
E-mail Address		ress	Mailing Add	
	32750	FL	Longwood	Lo
	Zip	State	City	
407-260-1033 Fax Number mark@csilongwood.com	32750	ess wood, FL 3275 ress FL	242 Rangeline Rd., Long Street Add 242 Rangeline Rd., Long Mailing Add Longwood	242 F

Annua	f	Ren	ort	of

for the calendar year of January 1 - December 31, 2016

6. Please provide the following information concerning the company's revenues for this calendar year:

Row	Revenues		MO Jurisdictional (Column A)			Total Company ¹ (Column B)
I. RE	TAIL	**		**	Ť	
	Local Service Revenues include tariffed revenues attributed to local telecommunications services, extended area service, secondary features such as call forwarding, caller ID, local operator services, directory-related services, etc. and for IVoIP service.					
2.	Interexchange Revenues include revenues attributed to interexchange telecommunications services such as toll services, 800 services, interexchange operator services and interexchange IVoIP services.		\$33,649.00			\$13,749,000.00
	Non-Switched Telecommunications Service Revenues include revenues attributed to retail local and interexchange private line services (but not special access or private line services provided to other telecommunications carriers).					
W-11	Bundled or Packaged Revenues include any revenues whereby the company is providing voice services in combination with multiple services whereby revenue can not be easily attributed to local, interexchange or non-switched categories. If such bundles includes Internet, video or some non-regulated service then the company's revenue shall be based on the company's rate offer for solely voice services. The excess revenue associated with the bundled service which is over the amount related to revenue associated with voice only service shall be recorded in the Total Company column. If voice service is only offered as part of a bundled service, the company shall identify all revenue associated with the bundle of services in the Missouri Jurisdictional column.					
	Retail Uncollectible Revenues from telecommunications revenues. (This amount is generally a negative number.)					
	RETAIL TOTAL (This amount should equal the total of Rows 1 - 5 above and should also match your Missourl Universal Service Fund Net Jurisdictional Revenue Report amount.)		\$33,649.00			\$13,749,000.00
	HER					
İ	Wholesate Revenues include intrastate switched, special access service revenues, carrier billing and collection revenues, and any other revenues derived from other telecommunications carriers.		Standard Name Andrews			
	Miscellaneous Revenues ² associated with non-retail services, such as, advertising revenues, rent revenues, corporate operations revenues, special billing arrangements, customer operations, plant operations, other incidental regulated revenues, and other revenue settlements. (NOTE FOR ILEC ONLY: refer to FCC account #s: 5230, 5240, 5250, 5261, 5262, 5263, 5264, 5269, and 5270.)					
	Other Uncollectible Revenues from other revenues. (This amount is generally a negative number.)			0.000		
!	High-Cost Federal USF Revenues include all revenues received as support from the Universal Service Fund for the High-Cost program.		N/A			
	Other Federal USF Revenues include all revenues received as support from the Universal Service Fund for the following programs: Low Income, Schools and Libraries, and Rural Health.		N/A			
ا	State USF Revenues include all revenues received as support from the Jniversal Service Fund.					
ļr	FOTAL REVENUES (This amount should equal the total of Rows 6 - 12 above.) Total MO Jurisdictional Revenue (Column A) should match Total Gross Intrastate Operating Revenue on the Statement of Revenue.		\$33,649.00			\$13,749,000.00

[&]quot;Telecommunications Service" as defined by Missouri Revised Statutes Section 386.020(54).

Do not include revenues for any company NOT listed at the top of the page.

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[&]quot;Interconnected Voice over Internet Protocol service" as defined by Section 386.020(23) RSMo.

¹ List total regulated revenue and IVoIP revenue provided by a registered company and, if applicable, non-regulated revenue for company name as listed at — the top of this page.

7. Line Quantities for Local Voice Service & IVoIP Service¹

			Re	tail				Wholesale to Non-Registered Nomadic IVoIP	
Exchange ²	**	Residential	**	**	Business	**	**	Providers ³	**
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	5450.00 4560.00	0			0			0	3553
Totals:		0			0			0	

¹ See instructions for additional clarification about filling out this page.

² Exchange refers to areas as listed in ILEC tariffs. (Exchanges are not always the same as rate centers, wire centers and central offices.)

³ Wholesale to Non-registered Nomadic IVoIP Providers refers to arrangements where your company is providing wholesale services for a nomadic IVoIP provider who is not registered with the Missouri PSC. (Do not use this column for retail line quantities or if your company sets the end user's rates.)

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for the calendar year of January 1 - December 31, 2016

Relay Missouri Annual Billing, Collections and Retention

8. Any ILEC, CLEC or VoIP provider must submit information in the table below. 1
(The table should be completely filled-in. The only exception is if a company is reporting "0" line quantities on page 4 whereby insert \$0 in the total row for each of the three columns.)

Month		ay Missouri Revent Collected (collected or received, ccording to your record- keeping methods)	ue **		Relay Missouri Retention Amount (of the amount collected)		Relay Missouri Revenue Remitted to Commission (of the amount collected)
January		\$0.00			\$0.00			\$0.00
February		\$0.00			\$0.00	111 11114		\$0.00
March		\$0.00			\$0.00	10 40		\$0.00
April		\$0.00			\$0.00	200		\$0.00
May	000.00	\$0.00			\$0.00			\$0.00
June	NE S	\$0.00			\$0.00			\$0.00
July	86	\$0.00			\$0.00			\$0.00
August		\$0.00			\$0.00		1855, 656	\$0.00
September		\$0.00			\$0.00			\$0.00
October	1970 (A) 1220 (B)	\$0.00		A COUNTY	\$0.00			\$0.00
November	1300	\$0.00		100	\$0.00			\$0.00
December		\$0.00		5 milion 6 milion	\$0.00			\$0.00
Total		\$0.00			\$0.00			\$0.00

ease indicate the December.	per line value of the	e Relay Missou	ri Surcharge appl	ied to your custon
our firm did not i	impose the Relay M	issouri Surcha	rge, please explai	n:

For use when filing under seal.

Annual Report of Intellical Operator Services, Inc. dba ILD

for the calendar year of January 1 - December 31, 2016

VERIFICATION

The foregoing report must be verified by the oath of the President, Treasurer, General Manager or

	OATH
State Of	Florida }
	} ss:
County Of	Seminole }
	Mark Lammert makes oath and says that Name of Affiant (Company Official/Representative)
s/he is	Attorney-in-Fact
	Official Title of the Affiant (Company Official/Representative)
of .	Intellicall Operator Services, Inc. dba ILD Exact Legal Title or Name of the Respondent (Certificated Company Name)
	Exact Logar Title of Name of the Respondent (Continuated Company Hame)
and is located at	5000 Sawgrass Village Cr., Ste. 2 Ponte Vedra Beach, FL 32082
	Address and Telephone Number of the Affiant (Company Official/Representative)
belief, all statemer statement of the bi as applicable) the	amined the foregoing report; to the best of his or her knowledge, information, and is of fact contained in the said report are true and the said report is a correct siness and affairs of the above-named respondent, and 2) examined (and updated ompany's contact information in EFIS; to the best of his or her knowledge, lief, all listed contacts are correct.
from	January 1 , 2016 , to and including December 31 , 2016
	Month/Day Year Month/Day Year Signature of Affiant (Company Official/Representative)
Subscribed and sw	orn to before me, a Notary Public, in and for the State and County above named,
this _	22nd day of <u>March</u> , <u>2017</u>
My Comm	ssion expires 2019 , 2019
S K	ary Public State of Florida stin Hoover Commission FF 230199 olires 08/26/2019 Signature of Notary Public

Missouri Revised Statutes § 392.210 or §393.140