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Records Public Service Commission

Morion Telecon Inc (Full Company Name)

## INTEREXCHANGE TELECOMMUNICATIONS CARRIER

ANNUAL REPORT

**FILED**<sup>3</sup>

APR 0 7 2004

TO THE

Missouri Public Service Commission

## MISSOURI PUBLIC SERVICE COMMISSION

For Period Ending December 31, 2003

D	CAnnual Report of Morron Telecon inc
	for the year ended December 31, 2003
1.	State in full the exact 'certificated' name of the Interexchange Telecommunications Carrier: (Do not abbreviate; yet include any Commission approved fictitious name, if applicable.)
	Monon Telecomina
2.	Effective date of certification by the MO Public Service Commission and associated case number:
I	Date (e.g. 00/00/0000): 8 19 03 Case No: XA - 7.004 - 0037
3.	Was the company certificated in Missouri under any other name(s)? If yes, please provide all names and time periods involved since the original certification:
	NA
4.	State the name, title, street address, telephone number, fax number, and e-mail address* of the individual completing/verifying this Annual Report:  Pamela Kellex Alp 7101 S Fulton ST #700  Centrol Ol Sol Sol 700 ST #700  Centrol Ol Sol Sol Fax Okellex (Q) Olivor Sol March 1980  Centrol Ol Sol Sol Fax Okellex (Q) Olivor Sol March 1980  Centrol Ol Sol Sol Fax Okellex (Q) Olivor Sol March 1980  Centrol Ol Sol Sol Fax Okellex (Q) Olivor Sol March 1980  Centrol Ol Sol Sol Fax Okellex (Q) Olivor Sol March 1980  Centrol Ol Sol Sol Fax Okellex (Q) Olivor Sol March 1980  Centrol Ol Sol Sol Fax Okellex (Q) Olivor Sol March 1980  Centrol Ol Sol Sol Sol Sol Sol Sol Sol Sol Sol So
	(*) To facilitate electronic sending of the Annual Report form next year.
5.	State the name, title, street address, telephone number, fax number, and e-mail address of the company's regulatory contact person(s):  Parbara Vonderberd, 10-House, Attorney, 10101 S. Fulton ST. #700, Contend Cl. (D. 80117)  303-784-5379, 303-784-5367 Fax  by onderberd Q. (W) PCS, com
6.	Please provide a listing of all mergers, consolidations, and reorganizations, completed during the last year.
	NIA

IXC Annual Report of Monor Teleco	for the year ended December 31, 200
7. Please Provide the following information concerning Total gross intrastate operating revenues (i.e., Missouri Specific)	
Revenues:	Total Company MO Specific
Operating Revenues* from Telecommunication Services	9064904533947
MO Specific should match Statement of Revenue (FY-2005 Mo.PSC Assessment)	_
8. Type of Missouri tax return filed (i.e. MO-1065, MO-1120A, MO-1120S, MO-NRP, MO-NRS etc.):	Quarterly Form 53

9. Missouri Taxpayer ID:

1847863A

\* Missouri Revised Statutes §386.020(53)

- (53) "Telecommunications service", the transmission of information by wire, radio, optical cable, electronic impulses, or other similar means. As used in this definition, "information" means knowledge or intelligence represented by any form of writing, signs, signals, pictures, sounds, or any other symbols. Telecommunications service does not include:
- (a) The rent, sale, lease, or exchange for other value received of customer premises equipment except for customer premises equipment owned by a telephone company certificated or otherwise authorized to provide telephone service prior to September 28, 1987, and provided under tariff or in inventory on January 1, 1983, which must be detariffed no later than December 31, 1987, and thereafter the provision of which shall not be a telecommunications service, and except for customer premises equipment owned or provided by a telecommunications company and used for answering 911 or emergency calls;
- (b) Answering services and paging services;
- (c) The offering of radio communication services and facilities when such services and facilities are provided under a license granted by the Federal Communications Commission under the commercial mobile radio services rules and regulations;
- (d) Services provided by a hospital, hotel, motel, or other similar business whose principal service is the provision of temporary lodging through the owning or operating of message switching or billing equipment solely for the purpose of providing at a charge telecommunications services to its temporary patients or guests;
- (e) Services provided by a private telecommunications system:
- (f) Cable television service;
- (g) The installation and maintenance of inside wire within a customer's premises;
- (h) Electronic publishing services; or
- (i) Services provided pursuant to a broadcast radio or television license issued by the Federal Communications Commission:

IXC Annual Report of	MOTION IELECTION INC			
	for the year ended December 31, 2003			
10. In an effort to update our Electronic Filing & Information system (EFIS) with current company contact and address information please provide the following information. Either verify the information through EFIS and initial in space provided or complete each sub-type and the Data Center Staff will update as required.				
a. Official Representative of the Company:  Information contained in EFIS is current:				
Name:	Dava Strauss	initals		
Street/PO Box:	JIDL S FULTOO ST #7ND			
City, State, Zip:	Centennico (O SNIT			
Telephone number:	303-784-5302			
Fax number:	303-784-5301			
E-mail address:	detrauss @ awipes.com			
b. Consumer Services:	i company			
Name:	Information contained in EFIS is current:	initals		
Street/ PO Box:	STALL STALL			
City, State, Zip:	TIDI 3 PIALITY 9 SI TT' WO			
Telephone number:	303 (113-11-31			
Fax number:	303 7911 -621			
E-mail address:	50-21-0 0 0 2 2 2 6 2 2 6 2 2 2			
— <u></u>	Sange @ asipes, com			
c. Individual to receiv	re statement of revenue (assessment):  Information contained in EFIS is current:			
Name:	Pan Anshit	initals		
Street/ PO Box:	7101 S FULTOD ST #700			
City, State, Zip:	Centennial (D BN1)			
Telephone number:	308-784-5311			
Fax number:	303-784-5301			
E-mail address (*):	pamshoff @ awipes, com	•		
(*) To facilitate elec	tronic sending of the statement of revenue next year.			
In addition provide specific contacts for areas (d. through m.) if applicable on the following pages. In lieu of additional contacts being provided, designate if a, b, or c, above should be identified as the contact.				
d. Tariff:	Information contained in EFIS is current:			
Name:	Joelyn Mann	initals		
Street/ PO Box:	THE TOTAL STATE OF THE STATE OF	<del>-</del> -		
City, State, Zip:	Centennice (D 801/2	_		
Telephone number:		<u> </u>		
Fax number:	-,227.3 - 101 - 300 /	_		
E-mail address:	Imana @ awines com	_		
		_		

IXC Annual Report of	Monon Telecon inc		
•	for the year ended December 31, 2003		
10. continued		)	
e. CFO/Comptroller:	Information contained in EFIS is current:		
Name:	Mark Gritz	initals	
Street/ PO Box:	7101 S FULTOD ST #200		
City, State, Zip:	Centennial (D 20117		
Telephone number:	302-784-530D		
Fax number:	303-784-530		
E-mail address:	maritz a awi Des, 12m		
	3		
f. Technical:	Information contained in EFIS is current:		
Name:		initals	
Street/ PO Box:			
City, State, Zip:			
Telephone number:			
Fax number:			
E-mail address:			
g. Surveillance:	Information contained in EFIS is current:		
Name:	NIA	initals	
Street/ PO Box:			
City, State, Zip:			
Telephone number:			
Fax number:			
E-mail address:			
h. In-House Attorney:	Information contained in EFIS is current:		
Name:	Parbara Vonderheid	initals	
Street/PO Box:	7101 8 FILTON ST # 200		
City, State, Zip:	Ceptennia 100 80117		
Telephone number:	303-784 - 5379		
Fax number:	303-784-5367		
E-mail address:	buonderheid @ aw.pcs. wm		
	<del>-</del> '		
i. Attorney:	Information contained in EFIS is current:	<del></del> .	
Name:		initals -	
Street/ PO Box:		_	
City, State, Zip:		_	
Telephone number:		<b>-</b>	
Fax number:		**	
E-mail address:			

IXC Annual Report of	Monos	Telecon lac	
		for the year ended December 31, 2003	)
10. continued			
		Information contained in EFIS	
j. Consultant:		is current:	
Name:	NIA		initals
Street/ PO Box:	·		
City, State, Zip:			
Telephone number:			
Fax number:			
E-mail address:			
		Information contained in EFIS	
k. Other:		is current:	
Name:	NIP		initals
Street/PO Box:			
City, State, Zip:			
Telephone number:			
Fax number:			
E-mail address:			
		Information contained in EFIS	
l. Area Contact Entry:		is current:	
Name:	NIA		initals
Street/ PO Box:			
City, State, Zip:			
Telephone number:			
Fax number:			
E-mail address:	<del></del>		
		Information contained in EFIS	
m. Carrier Billing Relat	ions:	is current:	
Name:	Janet	DePiro	initals
Street/ PO Box:	7101 S FL	LIDO STREET # 200	
City, State, Zip:	Centenni	21/08 01 00	
Telephone number:	303-64	3- (01,30)	
Fax number:	303-78	45301	
E-mail address:	idepinto	o (e) Awipas, com	

IXC Annual Report of	Monon Teler	iom inc		
	·	for the year ended December 31, 2003		
VERIFICATION				
The foregoing report must be verified by the oath of the President, Treasurer, General Manager or Receiver of the company. The oath required may be taken before any person authorized to administer an oath by the laws of the State in which the same is taken.				
	OATH			
State Of County Of	DArapahoe	} ss:		
	Mark Grtz (Insert here the name of the	makes oath and says that ne affiant)		
s/he is	President (Insert here the official title of	of the affiant)		
of	of			
that s/he has examined the foregoing report; that to the best of his or her knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent.				
Januar	, 2003, to and	including Desember 31, 2003		
		(Signature of affiant)		
Subscribed and	sworn before me, a NOTANIL	in and for the		
State and county ab	ove named, this 25 <sup>th</sup>	day of March,2004		
My Commission	Sharen V Cl	lesple, Notary Public 120		
wy Commission (	haly Consumbed	of Golorado bn Expires 1/17/2006		
	(Signat	ure of officer authorized to administer oaths)		
Missouri Revised Stat	utes § 392.210			

Original must be mailed to:
Manager of the Data Center
MoPSC, 200 Madison Street, Suite 100
P.O. Box 360, Jefferson City, MO 65102-0360