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JAN 30 2006

Missouri Public  
Service Commission

Network Operator Services, Inc.

Full Company Name (Do not abbreviate, yet include any Commission approved  
AKA/DBA/Fictitious Name, if applicable.)

**COMPETITIVE LOCAL EXCHANGE CARRIER**

and / or

**INTEREXCHANGE TELECOMMUNICATIONS CARRIER**

**ANNUAL REPORT**

**TO THE**

**MISSOURI PUBLIC SERVICE COMMISSION**

**For The Year Ending December 31, 2005**

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Susan Freeman  
Network Operator Services, Inc. - IXC  
P.O. Box 3529  
Longview, TX 75606

CLEC-IXC

Annual Report of NDS  
for the year ending December 31, 2005

1.

State in full the exact 'certificated' name of the Competitive Local Exchange Carrier (CLEC) and/or Interexchange Telecommunications Carrier (IXC):  
(Do not abbreviate; yet include any Commission approved AKA/DBA/Fictitious Name, if applicable.)

Network Operator Services Inc.

2. State in full the company's street address, mailing address, telephone number, fax number, and e-mail address\*:

119 W. Nyltel, Ste 260

Longview, TN 37601

903.323.4571

FAX: 903.758.9372

sfreeman@centrisinfo.com

3. Is the utility certificated as a Competitive Local Exchange Carrier? If yes, state effective date (contained in Commission Order approving) of certification by the MO Public Service Commission and associated case number (original certificate or merger/name change if name on tariff effected):

Date (e.g. 00/00/0000): N/a Case No: N/a

4. Is the utility certificated as a Interexchange Telecommunications Carrier? If yes, state effective date (contained in Commission Order approving) of certification by the MO Public Service Commission and associated case number (original certificate or merger/name change if name on tariff effected):

Date (e.g. 00/00/0000): 12.28.1994 Case No: TA-95.90

5. 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:

no

6. This Competitive Local Exchange/Interexchange Telecommunications Carrier is a (Check box with an X) and if different than certificated name listed above (e.g. parent corporation name) or if 'Other' is identified, explain:

Corporation SCORP  
Partnership  
Sole Proprietorship

LLC  
LP  
Other - Explain

7. State in full the name, street address, telephone number, and e-mail address\* of the individual completing/verifying this Annual Report:

Susan Freeman

119 W. Nyltel, Ste 260

Longview, TN 37601

903.323.4571

sfreeman@centrisinfo.com

(\*) Required if available. State n/a (not available) if no e-mail address is available.



CLEC-IXC

Annual Report of NDS

for the year ending December 31, 2005

11. Please provide the following information concerning Total Company and gross intrastate operating revenues (i.e., Missouri Jurisdictional) Revenues for this Calendar Year: 2005

<u>Revenues:</u>	Total Company	MO Jurisdictional
Operating Revenues* from Telecommunication Services	1,382.042	11,541
Access Fee Revenues		
Federal USF Subsidies		
State USF Subsidies		
Other Revenues		
<b>TOTAL REVENUES</b>	<b>1,382.042</b>	<b>11,541</b>

MO Jurisdictional should match Statement of Revenue (MoPSC Assessment)

\* 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;

12. Local Exchange Carriers Federal/State Low-Income/Disabled Universal Service Fund Subscribers

**Background and Purpose:** To ascertain on a monthly basis the number of subscribers being provided federal and/or Missouri low-income/disabled support as being reported to USAC (federal support, Form 497) and the fund administrator of the Missouri programs (Missouri support).

Calendar Year 2005

N/a

Month	Number of	Number of
	Missouri Low Income subscribers	Missouri Disabled subscribers
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		
<b>TOTAL:</b>	0	0





**Submitting this Annual Report is an "option" through EFIS.**

A registered official company representative is authorized to utilize this option, type in all necessary information below, including the Notary's information (pursuant to Sections 432.200 and 432.295). After submitting the Annual Report through EFIS, you will receive a BMAR (confirmation) number. Indicate that BMAR number on the original and retain for your records.

CLEC-IXC  
Annual Report of Network Operator Services, Inc.  
for the year ending December 31, 2005

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 Texas  
County Of Gregg } ss:  
Linda Martin makes oath and says that  
(Insert here the name of the affiant)

s/he is Secretary  
(Insert here the official title of the affiant)

of Network Operator Services, Inc.  
(Insert here the exact legal title or name of the respondent)

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.

1-1, 2005, to and including 12-31, 2005

Linda Martin  
(Signature of affiant)

Subscribed and sworn to before me, a Notary Public in and for the  
State and county above named, this 25<sup>th</sup> day of January, 2006  
My Commission expires 1-7, 2010

  
Susan P. Freeman  
(Signature of officer authorized to administer oaths)

Missouri Revised Statutes § 392.210

Original in its entirety must be mailed (if not utilizing EFIS) to:  
**Manager of the Data Center**  
MoPSC, 200 Madison Street, Suite 100  
Jefferson City, MO 65101 (P.O. Box 360, 65102-0360)