

# COMPETITIVE TELECOMMUNICATIONS SERVICE PROVIDERS

For the provision of (check all that apply):

☒ INTEREXCHANGE CARRIER

☐ COMPETITIVE ACCESS

☐ ALTERNATIVE OPERATOR SERVICE PROVIDER

☐ COMPETITIVE LOCAL  
EXCHANGE CARRIERS

☐ OTHER (Describe):

## ANNUAL REPORT

OF

Trans National Communications International, Inc.

(Exact legal name of respondent)

If name was changed during year, show also the  
previous name and date of change.

www.tncii.com

Website URL

2 Charlesgate West. Boston, Suffolk MA 02215

Address	City	County	State	Zip Code

617-369-1000

Phone: (Area Code) Number

2 Charlesgate West Boston, MA 02215

(Address of principal business office at end of year)

TO THE  
PUBLIC UTILITIES COMMISSION OF OHIO



FOR THE  
YEAR ENDED DECEMBER 31, 2010

Name, title, address, e-mail address and telephone number (including area code) of the person to be contacted concerning this report.

Carol Denton, Attorney in Fact, 3100 Cumberland Blvd. Suite 900 Atlanta, GA 30339

Email: carol.denton@thomsonreuters.com, Phone: 770-956-7525 ext. 1513, Fax: 770-956-0700



### **IDENTITY OF RESPONDENT**

1. Identify respondent's form of business organization: sole proprietorship, partnership, corporation, or other (explain).

Corporation

2. If a consolidated, merged, or reorganized company, briefly provide particulars of such transactions, the date of the transactions, and PUCO authority. If a reorganized company, give name of original company.

Not Applicable

3. Identify any other names (other than shown on title page) under which respondent conducted any part of its business during the year.

None

4. If incorporated specify:
  - a. Date of filing articles of incorporation: August 01, 1995
  - b. State in which incorporated: Delaware

5. Identify PUCO Case Number (and date issued) granting operating authority and identify certificate number(s) issued.

90-9177 December 30,1999

6. State whether respondent is operational in Ohio (actually providing service and the date operations began), or available (but not currently providing service).

After Commission Approval Date

## Instructions:

Schedule 1 is used for PUCO annual assessment purposes pursuant to Section 4905.10, RC. The reporting company shall maintain supporting and/or subsidiary records to separately record revenues derived from total operations and from its Ohio intrastate operations. Information presented herein is subject to audit by the PUCO.

The jurisdictional separation of revenues reported in this schedule should conform, to the extent applicable, to the procedures and instructions of CFR 47 Parts 32 and 36.

For interexchange carriers, intrastate refers to messages originating and terminating in Ohio.

For cellular, competitive access, and paging providers, intrastate refers to amounts billed to an Ohio account.

## SCHEDULE: 1

**STATEMENT OF INTRASTATE GROSS EARNINGS (REVENUE)**

1	Operating and Miscellaneous Revenue - Wholesale Cellular Communications, Radio Common Carrier, Directory Revenue, Rent Revenue, Special Billings (revenue from work performed for others, rent revenue-nonoperating return on regulated investment used to provide nonregulated products and services, etc.)	\$214,169,000
2	Other Revenue, Dividend and Interest Income, Gains From Disposition of Property -- Operating and Nonoperating, Other Operating or Nonoperating Gains (foreign currency exchange or transfer, extinguishment of debt, company's share of earnings of affiliated company accounted for on equity method, income from sinking and other funds, etc.)	\$0
3	<b>SUBTOTAL (1) + (2)</b>	\$214,169,000
4	Earnings or receipts from sales to other public utilities for resale	\$0
5	<b>TOTAL (3) - (4)</b>	\$214,169,000

**IN ORDER TO ENSURE THAT PUCO CORRESPONDENCE/INVOICES IS/ARE DIRECTED TO THE APPROPRIATE PERSON AT THE CORRECT ADDRESS, PLEASE COMPLETE THE FOLLOWING.**

**Name, Title, E-mail, Address, and Phone Number of the Company's Contact Persons**

Erick Robinson  
Name

Tax & Regulatory Specialist  
Title

erobinson@tncii.com  
E-mail

2 Charlesgate West Boston, MA 02215  
Address

617-369-1000  
Phone Number (Including Area Code)

**Name, Title, E-mail, Address, and Phone Number of Person to whom Invoice  
should be Directed**

Carol Denton  
Name

Attorney in Fact  
Title

carol.denton@thomsonreuters.com  
E-mail

3100 Cumberland Blvd. Suite 900 Atlanta, GA 30339  
Address

770-956-7525  
Phone Number (Including Area Code)

**Name and Address of the President**

Brian Twomey, President  
Name

2 Charlesgate West Boston, MA 02215  
Address

**VERIFICATION**

The foregoing report must be verified by the President or Chief Officer of the company.

**OATH**

State of Georgia

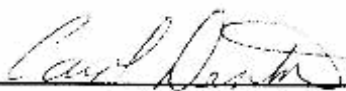
County of Cobb

Carol Denton makes oath and says that

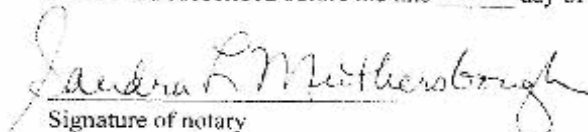
s/he is Attorney in Fact

of Trans National Communications International, Inc.

that s/he has examined the foregoing report; that to the best of her/his 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 in respect to each and every matter set forth therein during the period from and including January 1, 2010 to and including December 31, 2010.

  
(Signature of affiant.)

Sworn and subscribed before me this 2nd day of May, 2011 Month/Year

  
Signature of notary

My commission expires on 3/7/2013



**This foregoing document was electronically filed with the Public Utilities**

**Commission of Ohio Docketing Information System on**

**5/2/2011 11:24:34 AM**

**in**

**Case No(s). 11-0005-TP-RPT**

Summary: Annual Report Trans National Communications Internationl, Inc electronically filed by Mrs. Carol Denton on behalf of Thomson Reuters and Mrs. Carol Denton