

COMPETITIVE TELECOMMUNICATIONS SERVICE PROVIDERS

For the provision of (check all that apply):

☐ INTEREXCHANGE CARRIER

☐ COMPETITIVE ACCESS

☐ ALTERNATIVE OPERATOR SERVICE PROVIDER

☒ COMPETITIVE LOCAL

☐ VOICE OVER INTERNET PROTOCOL (VOIP)

EXCHANGE CARRIERS

☐ OTHER (Describe):

ANNUAL REPORT OF

Long Distance Consolidated Billing Co.

(Exact legal name of respondent)

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

Website URL

20 W Washington Street, Suite 6A. Clarkston, Oakland MI 48346

Address

City

County

State

Zip Code

(248) 625-3245

Phone: (Area Code) Number

20 West Washington Street Clarkston, MI 48346

(Address of principal business office at end of year)

TO THE PUBLIC UTILITIES COMMISSION OF OHIO



FOR THE
YEAR ENDED DECEMBER 31, 2011

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

Patrick D Crocker, President, Nationwide Regulatory Compliance, LLC, 107 W Michigan Ave, 4th Fl, Kalamazoo

Email: contact@nationwideregulatorycompliance.com, Phone: (269)381-8888, Fax: (269)381-4855

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.

n/a

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

n/a

4. If incorporated specify:

a. Date of filing articles of incorporation: December 01, 1995

b. State in which incorporated: Michigan

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

90-5995-CT-TRF

09/26/2001

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

Operational -/26/2001

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.)	\$109,295
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	SUBTOTAL (1) + (2)	\$109,295
4	Earnings or receipts from sales to other public utilities for resale	\$0
5	TOTAL (3) - (4)	\$109,295

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

April Copeman
Name

Administrative Manager
Title

acopeman@ldcb.com
E-mail

20 W Washington St, Suite 6A Clarkston MI 48346
Address

(248)625-3245
Phone Number (Including Area Code)

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

Patrick D Crocker
Compliance, LLC
Name

President, Nationwide Regulatory
Title

contact@nationwideregulatorycompliance.com
E-mail

107 W Michigan Ave 4th Fl Kalamazoo MI 49007
Address

(269)381-8888
Phone Number (Including Area Code)

Name and Address of the President

Jan Lowe, President
Name

20 W Washington St, Suite 6A Clarkston MI 48346
Address

VERIFICATION

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

OATH


State of Michigan
County of Oakland

Jan M Lowe makes oath and says that

s/he is President

of Long Distance Consolidated Billing Co.

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, 2011 to and including December 31, 2011.


(Signature of affiant.)

Sworn and subscribed before me this 17th day of May, 2012 Month/Year


Signature of notary

My commission expires on Nov. 3, 2013

APRIL L. COPEMAN Notary Public, State of Michigan County of Oakland My Commission Expires Nov. 03, 2013 Acting in the County of

This foregoing document was electronically filed with the Public Utilities

Commission of Ohio Docketing Information System on

5/21/2012 3:05:20 PM

in

Case No(s). 12-0005-TP-RPT

Summary: Annual Report Annual Report for Long Distance Consolidated Billing Co
electronically filed by Patrick D Crocker on behalf of Long Distance Consolidated Billing Co