

FILE

12-09-WT-RPT

- ☐ HEATING AND COOLING  
☒ WATER TRANSPORTATION COMPANIES

# ANNUAL REPORT

OF  
 KELLEYS ISLAND FERRY BOAT LINES, INC.

(Exact legal name of respondent)

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

Website URL (where this filing is available for public viewing)  
 3203 HARVARD AVENUE, NEWBURGH HTS., OHIO 44105

(Address of principal business office at end of year)

## TO THE PUBLIC UTILITIES COMMISSION OF OHIO



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FOR THE  
 YEAR ENDED DECEMBER 31, 2011\_\_

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

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**GENERAL INSTRUCTIONS, DEFINITIONS, ETC.**

1. The word "Respondent" in the following inquiries means the person, firm, association, or company in whose behalf the report is made.
2. The schedules and questions contained in this report were developed to be generally applicable to all heating and cooling, pipeline and water transportation companies. All instructions shall be followed and each question answered as fully and accurately as possible. Sufficient answer shall appear to show that no schedule, question, or line item has been overlooked. If a particular line item or schedule does not apply to the respondent, indicate this by answering "none", "-0-", or "not applicable", as appropriate, where it truly and completely states the fact.
3. If answers to an inquiry are given elsewhere in the report, incorporation of information by reference is sufficient.
4. Customary abbreviations may be used except that the exact name of the respondent shall be shown in full on the "Title Page" and in the "Verification" page.
5. Where the space provided is insufficient for the required data or it is necessary or desirable to insert additional statements or schedules, the insert pages shall show the number and title of the schedule to which it pertains, as well as the name of the respondent and the year covered, and shall be on 8 1/2" x 11" durable paper.
6. The information required with respect to any statement furnished is the minimum requirement. The respondent may add such further material information as is necessary to ensure that the required statements are not misleading.
7. All copies filed with the Commission must be legible and permanent. All entries shall be made in permanent ink or by a typewriter. Items of a reverse or contrary character shall be enclosed in parentheses, or indicated by a minus sign followed by the amount.
8. Amounts on any schedule (except as otherwise provided therein), may, at the option of the respondent, be rounded off to whole dollars provided that amounts are appropriately adjusted to agree with the rounded total.
9. The annual report shall be signed by a duly elected officer of the respondent and it shall be notarized.
10. The information required in this report, unless otherwise indicated, is to be reported for the entire company and not for the State of Ohio only.
10. Totals should be provided as indicated. The respondent shall ensure that schedule totals and subtotals are mathematically correct.
12. If a line item is supported by a detailed schedule elsewhere in this report, the respondent should ensure that the detailed schedule is completed and that the amounts on both schedules match.

## HISTORY

1.	Exact name of company making this report. KELLEYS ISLAND FERRY BOAT LINES, INC. _____
2.	Date of organization NOVEMBER 20, 1989 _____
3.	Under the laws of what Government, State or Territory organized? If more than one, name all. OHIO _____ _____ _____
4.	If a consolidated or merged company, name all constituent and all merged companies. N/A _____ _____ _____
5.	Date and authority for each consolidation and each merger. N/A _____
6.	State whether respondent is a corporation, a joint stock association, a firm or partnership, or an individual. CORPORATION _____ _____ _____
7.	If a reorganized company, given name of original corporation, refer to laws under which it was organized, and state the occasion for the reorganization. N/A _____ _____ _____
8.	State whether or not, the respondent during the year conducted any part of its business under a name, or names, other than shown, in response to inquiry No. 1. If so, give full particulars. N/A _____ _____ _____
9.	Where are the books and records of the company kept? CORPORATE OFFICE - 3203 HARVARD AVENUE, NEWBURGH HEIGHTS, OHIO 44105 _____ _____
10.	Name below all classes of public service furnished by the respondent. PASSENGER WATER TRANSPORTATION _____ _____ _____ _____

**IDENTITY OF RESPONDENT**

1. State whether respondent is a corporation, a joint stock association, a firm or partnership, or an individual.  
AN OHIO CORPORATION
2. Date when operations began.  
NOVEMBER 20, 1989
3. If a consolidated or merged company, give names of each such incident, date, and Commission authority. If a reorganized company, give name of original corporation.  
N/A
4. If incorporated specify     (a) Date of filing articles of incorporation, NOVEMBER 20, 1989  
                                     (b) State in which incorporated, OHIO
5. Commission Case Number granting operating authority and date issued.  
UNKNOWN
6. State whether or not the respondent during the year conducted any part of its business under a name or names other than that shown Title Page; if so, give full particulars.  
N/A
7. Description of general service territory.  
MARBLEHEAD/SANDUSKY/KELLEYS ISLAND/LAKE ERIE ISLANDS
8. List all affiliated companies with whom the respondent does business and their relationship to the respondent. If respondent is a partnership, provide this information for each partner. (Use separate page(s) if needed). SEE ATTACHED #9 AND #12  
State whether the affiliate is (a) a regulated public utility or, (b) a publicly held corporation.  
NEITHER
9. Did any corporation or corporations, telephone or other, hold control over the respondent at the close of the year? YES If control was so held, state: SEE SCHEDULE #3
  - a. The name and address of the controlling corporation or corporations.
  - b. The form of control, whether sole or joint.
  - c. The extent of control.
  - d. Whether control was direct or indirect.
  - e. If indirect, the name and address of the intermediary through which control was established.
10. Did any individual, association, or corporation hold control, as trustee, over the respondent at the close of the year? NO If control was so held, state:
  - a. The name and address of the trustee.
  - b. The name and address of the beneficiary or beneficiaries for whom the trust was maintained, if available.

11. Did the respondent hold control over other corporations at the close of the year? NO

If so, state:

- a. The name and address of corporation or corporations controlled.
- b. The form of control, whether sole or joint.
- c. Other parties, if any, to joint agreement for control.
- d. The extent of control.
- e. Whether control is direct or indirect.
- f. If indirect, the name and address of the intermediary through which control was established.



**TYPE OF SERVICE SUPPLIED**[illegible]



**IMPORTANT CHANGES DURING THE YEAR**

Report important changes of the types listed. Except as otherwise indicated data furnished should apply to the same period the report covers. Answers should be numbered in accordance with the inquiries and if "none" states the fact, it should be used. If information which answers an inquiry is given elsewhere in the report, incorporation of that information by reference will be sufficient.

1. Issuances of Capital Stock or long term debt during the year: Identify the securities, date, consideration received and Commission authorization.  
NO CAPITAL STOCK ISSUED
2. Changes in franchise rights.  
N/A
3. Changes in ownership or control (*shareholders holding 5% or more of outstanding stock*).  
NONE
4. Other important changes: Give brief particulars of each other important change which is not disclosed elsewhere in this report.  
NONE

## SCHEDULE: 3

**VOTING POWERS AND ELECTIONS**

1. In the schedule below, show the particulars called for concerning the stockholders of respondent who, at the date of the latest closing of the stock-book of respondent prior to the actual filing of this report, had the twenty highest voting powers of the respondent. If any such holder held in trust, attach a statement showing the beneficial owners. If the stock-book was not closed within the year, show twenty such stockholders as of the close of the year. In the space provided, show total shares and notes of all stockholders.

Line No.	Name and Address of Stockholders	No. of Shares Held	No. of Voting Shares	Other Vote Empowered Securities
1.	JAP HOLDING COMPANY 3203 HARVARD AVENUE NEWBURGH HTS., OHIO 44105	500	500	NONE
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
Total listed above				

Total all stockholders			
------------------------	--	--	--

## SCHEDULE: 4

**DIRECTORS, PROPRIETORS, PARTNERS**

1. Give the name of director or proprietor. (For partnerships identify each partner, identify which are general or limited partners, and show each partner's percent of interest.

Line No.	Name and Address (City and State) (a)	Served Continuously From (b)	Term Expired or Current Term Will Expire (c)
1	N/A		
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
(For corporations, show the data requested; for other forms of business organizations, show names of individuals holding comparable positions.)			
16	Name of Chairman of the Board - N/A	21.	Treasurer - JAMES PALLADINO
17	Name of Secretary of Board - N/A	22.	Controller - N/A
18	President - AUGUST PALLADINO		
19	Vice-President - N/A		
20	Secretary - CARMEN PALLADINO		

SCHEDULE: 5

## BALANCE SHEET

[illegible]

SCHEDULE: 5A

## NOTES TO BALANCE SHEET

SCHEDULE: 6

## INCOME STATEMENT

[illegible]

SCHEDULE: 6A

## NOTES TO INCOME STATEMENT



SCHEDULE: 7

## INVESTMENTS

[illegible]





## SCHEDULE: 9

NOTES AND OTHER ACCOUNTS RECEIVABLE					
Notes Receivable			*Other Accounts Receivable		
Name of Debtor	Amount at Close of Year	Name of Debtor	Amount at Close of Year		
		A/R TRADE	25729		
Total		Total	25729		
ACCOUNTS RECEIVABLE FROM ASSOCIATED COMPANIES					
Name of Debtor	Consideration Received	Amount at Close of Year			
JAP HOLDING COMPANY	CONSOLIDATED COMPANY				
And SUBSIDIARIES	NOTES				
And	open ended				
CAPITAL CONTROL, INC.	-CURRENT	7	317	541	
CAPITAL ACQUISITION	-NON-CURRENT	3	645	032	
	Total	10	962	573	
*Show major items only. Minor items may be reported in one group.					

SCHEDULE: 10 -

CAPITAL STOCK						
1. Respondent shall enter the class of stock and a description of any pertinent details such as differences in voting rights, preferences as to dividends or assets, pledges, etc. 2. Respondent shall provide the information specified in column headings (b) through (h) and note any other pertinent information at the bottom of this schedule.						
Class and Description of Capital Stock (a)	Par or Stated Value Amount (b)	Number of Shares Authorized (c)	Amount of Stock Issued and Outstanding (d)	Additional Paid In Capital (e)	Total (Col. (d) & (e)) (f)	Number of Shares of Treasury Stock (g)  Amount in Treasury Stock Account (h)
COMMON STOCK	\$NO PAR	500	\$500		\$500	

TOTALS	\$NO PAR	500	\$500	\$500
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SCHEDULE: 13

[illegible]

SCHEDULE: 14

**BASES OF CHARGES FOR DEPRECIATION**

1. Provide separate schedules for each jurisdiction in which the respondent operates and for the overall operations of the respondent.
2. Under column (a) provide all subclasses for plant for which a separate depreciation rate is determined and a subtotal for each primary account
3. Under columns (b) thru (d) provide the life, net salvage, and rate prescribed by the Commission.

☐ Jurisdiction \_\_\_\_\_

☐ Overall Operations

Classes and Subclasses of Depreciation Plant					
	Account Number and Title of Plant Accounts and its Subclasses (a)	Life (Years) (b)	*Net Salvage (%) ©	Depreciation	
				*Rate (%) (d)	*Reserve % (e)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
32					
33					
*Composite rate for all depreciable accounts					
*Composite rate for all plant accounts					
Ratio to for all depreciable accounts					
Ratio for all plant accounts					

## SCHEDULE: 15

**STATEMENT OF RETAINED EARNINGS**

Account No.	Item	Page No.	Amount
	Balances-First of Year		1,957,233
	Changes:		
	Balance Transferred from Income		1,835,373
	Dividends Declared		
	Miscellaneous Debits to Retained Earnings		
	Miscellaneous Credits to Retained Earnings		
	Balance-End of Year		3,792,606
	Notes to Statement of Retained Earnings:		

## SCHEDULE: 16

**PARTNERSHIP CAPITAL STATEMENT <sup>(1)</sup>**

Account No.	Item	Page No.	Amount
	Partnership Capital-Beginning of Year		
	Net Income (Loss) for Year		
	Partners' Capital Contributions		
	Miscellaneous Credits		
	Total Credits		
	Partners' Drawings		
	Prior Period Adjustment(s)		
	Miscellaneous Debits		
	Total Debits		
	Partnership Capital-End of Year		

<sup>(1)</sup> This statement should also be used by sole proprietors.



SCHEDULE: 18

## UTILITY PLANT IN SERVICE-ACCOUNT 101

[illegible]

SCHEDULE: 19

## OPERATING REVENUES AND EXPENSES

	Amount
Operating Revenues (Show accounts in order kept)	4,484,642
Total Operating Revenues	4,484,642
Operating Expenses (Show accounts in order kept)	
DIRECT LABOR	824,440
FUEL, OIL & LUBE	453,003
MAINTENANCE	192,139
RENT EXPENSE	240,000
OTHER GENERAL AND ADMINISTRATIVE	939,687
Total Operating Expenses	2,649,269

## SCHEDULE: 20

**STATEMENT OF INTRASTATE-GROSS EARNINGS (1)**

Line No.	Item	Total Company	Amount	
			Other Than Ohio Intrastate	Ohio Intrastate
1	Operating and Miscellaneous 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.)	4,484,642		4,484,642
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.)			
3	SUBTOTAL (1) + (2)	4,484,642		4,484,642
4	Earnings or receipts from sales to other public utilities for resale	( )	( )	( )
5	TOTAL (3) + (4)	4,484,642		4,484,642
<p>(1) Intrastate means from one point in Ohio to another point in Ohio, or wholly within Ohio.</p>				

## SCHEDULE: 21

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

**Name, Title, Address, and Phone Number of the Company's Contact Persons  
To Receive Entries and Orders from the Docketing Division**

AUGUST PALLADINO

Name

PRESIDENT

Title

3203 HARVARD AVENUE, NEWBURGH HEIGHTS, OHIO 44105

Address

216-883-7200; 216-244-2251

Phone Number (Including Area Code)

AUGIE@OHIOBULK.COM

E-Mail Address

**Name, Title, Address, and Phone Number of Person to whom Invoice  
Should be directed**

CHERYL LINDENBERG

Name

BOOKKEEPER

Title

3203 HARVARD AVENUE, NEWBURGH HEIGHTS, OHIO 44105

Address

216-883-7200

Phone Number (Including Area Code)

CHERYL@OHIOBULK.COM

E-Mail Address

**Name and Address of the President**

AUGUST PALLADINO

Name

President3203 HARVARD AVENUE, NEWBURGH HEIGHTS, OHIO 44105

Address



**VERIFICATION**

The foregoing report must be verified by the President or Chief Officer 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 OHIO  
County of CUYAHOGA

AUGUST PALLADINO makes oath and says that  
(Insert here the name of the affiant.)

he is PRESIDENT  
(Insert here the official title of deponent)

of KELLEYS ISLAND FERRY BOAT LINES, INC.  
(Insert here the exact legal title or name of the respondent.)

that he has examined the foregoing report; that to the best of 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.

August Palladino  
(Signature of affiant.)

Subscribed and sworn to before me, a Notary Public in and for the State and county named, this 19<sup>th</sup> day of September 2012. My commission expires November 23, 2012.

Cheryl A. Lindenberg  
(Signature of officer authorized to administer oaths.)

**CHERYL A. LINDENBERG, NOTARY PUBLIC**  
**STATE OF OHIO**  
**Resident Portage County**  
**My Commission Expires November 23, 2012**