

AMENDED 8-1-05**COMPETITIVE TELECOMMUNICATIONS
SERVICE PROVIDERS**

For the provision of (check all that apply):

- INTEREXCHANGE CARRIER
- ALTERNATIVE OPERATOR SERVICE PROVIDER
- COMPETITIVE ACCESS
- COMPETITIVE LOCAL EXCHANGE CARRIERS
- OTHER (Describe):

ANNUAL REPORT

OF

TWIN CITY CAPITAL, LLC
(Exact legal name of respondent)

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

www.sbalongdistancegroup.com
Website URL

<u>7300 Hudson Blvd, Suite 265</u>	<u>Oakdale</u>	<u>Washington</u>	<u>MN</u>	<u>55128</u>
Address	City	County	State	Zip Code

651-649-3575
Phone: (Area Code) Number

7300 Hudson Blvd, Suite 265, Oakdale MN 55128
(Address of principal business office at end of year)

**TO THE
PUBLIC UTILITIES COMMISSION OF OHIO**



**FOR THE
YEAR ENDED DECEMBER 31, 2004**

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

Jon Greene, Managing Member, 7300 Hudson Blvd, Suite 265, Oakdale, MN 55128
jon@coremarkinc.com, 651-649-3575

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Annual Report of Twin City Capital, LLC

Year Ended December 31, 2004

GENERAL INSTRUCTIONS, DEFINITIONS, ETC.

Please read the general instructions carefully before filling out this form:

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 competitive telecommunication service providers. All instructions shall be followed and each question answered as fully and accurately as possible. Sufficient answers shall appear to show that no schedule, question, or line item has been overlooked.
3. If answers to an inquiry are given elsewhere in the report, incorporation of the 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. The annual report shall be signed by a duly elected officer of the respondent and it shall be notarized.
9. "Operating" as used in this report refers to regulated operations while "Nonoperating" refers to nonregulated operations.

Annual Report of Twin City Capital, LLC

Year Ended December 31, 2004

IDENTITY OF RESPONDENT

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

Limited Liability Company

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.

NA

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

d/b/a Small Business America

4. If incorporated specify:

- a. Date of filing of articles of incorporation. 06/2001
b. State in which incorporated. Minnesota

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

10/11/2002 Docket # 02-2368-CT-ACE

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

Yes 10/11/2002

7. If operational, identify Ohio counties where respondent is providing service.

Statewide

8. List the types of services provided by the respondent, e.g., residential voice, business voice, business data, other (specify types of other services provided).

Business voice

9. Identify if services are provided by resale (total service resale of local exchange company service) or facilities based (through respondent's own switch or via UNE platform), and names of Ohio counties where each type of service is provided.

NA

10. Identify local exchange companies that respondent has interconnection agreements with to provide service in Ohio.

NA

Annual Report of Twin City Capital, LLC

Year Ended December 31, 2004

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, identification of the other answer will be sufficient.

1. Changes in ownership or control (shareholders holding 5% or more of outstanding stock).
None
2. Other important changes: Give brief particulars of each other important change which is not disclosed elsewhere in this report. None

SCHEDULE 1

DIRECTORS, PROPRIETORS, PARTNERS			
1. Give the name of each 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	Jon Greene		
2	Leon Oistad		
3	Scott White		
4	Jim Holmquist		
5			
6	(Oakdale, MN 55128)		
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	21	Treasurer
17	Name of Secretary of Board	22	Controller
18	President		Managing Member Jon Greene
19	Vice-President		
20	Secretary		

Instructions:

Schedule 2 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: 2

STATEMENT OF INTRASTATE GROSS EARNINGS (REVENUE)		
Line No.	Item	Amount Ohio Intrastate
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.)	89,719.75
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.)	0.00
3	SUBTOTAL (1) + (2)	89,719.75
4	Earnings or receipts from sales to other public utilities for resale	(0.00)
5	TOTAL (3) + (4)	89,719.75

Annual Report of Twin City Capital, LLC

Year Ended December 31, 2004

SCHEDULE: 3

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

Jon Greene
Name

Managing Member
Title

7300 Hudson Blvd, Suite 265, Oakdale, MN 55128
Address

651-649-3575
Phone Number (Including Area Code)

Name, Title, Address, and Phone Number of Person to whom Invoice
should be Directed

Jon Greene
Name

Managing Member
Title

7300 Hudson Blvd, Suite 265, Oakdale, MN 55128
Address

651-649-3575
Phone Number (Including Area Code)

Name and Address of the President

Jon Greene
Name

Managing Member
President

7300 Hudson Blvd, Suite 265, Oakdale, MN 55128
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

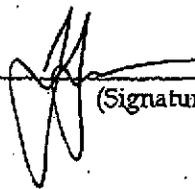
State of Minnesota
County of Washington

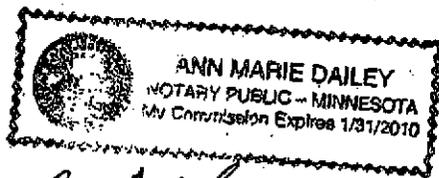
Jon Greene makes oath and says that
(Insert here the name of the affiant.)

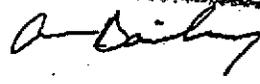
he is Managing Member
(Insert here the official title of deponent)

of Twin City Capital, LLC d/b/a Small Business America
(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 01/01, 20 04, to and including 12/31, 20 04.


(Signature of affiant.)





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

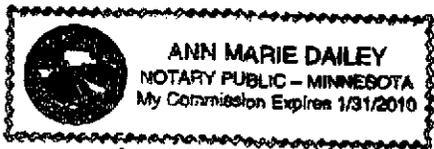
State of Minnesota
County of Washington

Ion Greene makes oath and says that
(Insert here the name of the affiant.)

he is Managing Member
(Insert here the official title of deponent)

of Twin City Capital, LLC d/b/a Small Business America
(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 01/01, 2004 to and including 12/31, 2004.



Ann Marie Dailey

[Handwritten Signature]

(Signature of affiant)



Ohio Consumers' Counsel

Residential Utility Advocate

July 20, 2005

Jon Greene
Managing Member
~~Twin City Capital, LLC~~
dba Small Business America
7300 Hudson Blvd.
Suite 265
Oakdale, MN 55128

Dear Assessee:

The Office of the Ohio Consumers' Counsel (OCC) hereby requests verification of your company's Ohio intrastate gross revenues. The figure shown below was either recorded in your company's Annual Report to the Public Utilities Commission of Ohio (PUCO) as of December 31, 2004, a copy of which is required to be submitted to the OCC, or provided to me by the PUCO. This figure will be used to calculate your company's assessment for the FY 2006 operation of the OCC.

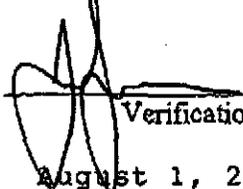
~~\$106,973.50~~ \$89,719.75

If the amount recorded by our office is accurate, please sign below. If the amount is inaccurate, please provide the correct figure and explain any variance in the intrastate gross revenues of your company. This verification must be returned to our office by **August 3, 2005**. An invoice, based on the figure you provide, will be mailed to your company on **September 7, 2005**, with payment due by **October 7, 2005**.

For your convenience, you may fax your reply to (614) 466-9475. If you have any questions regarding this request, please contact me at (614) 466-9589.

Sincerely,

Patricia Tanner
Patricia Tanner
Analytical Division



Verification Signature
August 1, 2005

Date

10 West Broad Street
Suite 1800
Columbus, Ohio 43215-3485

(614) 466-8574

(614) 466-9475 facsimile

1-877-PICKOCC toll free

www.pickocc.org

Small Business America



7300 Hudson Blvd
Suite 265
Oakdale, MN 55128
651-649-3575 (tel)
651-649-3580 (fax)

August 4, 2005

Public Utility Commission of Ohio
180 East Broad Street
Columbus, OH 43266-0573

VIA FACSIMILE
614-644-9546

Attention: **Andrea Michael**

Re: **Twin City Capital, LLC (d/b/a Small Business America)**
2004 Competitive Telecommunications Service Providers Annual Report-Amended

Dear Ms. Michael:

Per suggestion of OCC, I am faxing to you the OCC letter stating 2004 gross intrastate revenues, dated August 1, 2005. I previously faxed to you an **Amended 2004 Competitive Telecommunications Service Providers Annual Report** for Twin City Capital, LLC.

Thank you again for your courtesies in this matter, and please advise if you need anything additional, or if there are any questions or concerns.

Sincerely,

John M. Hendrickson

JMH/jh

enclosure