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FLORIDA LEGISLATURE—LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT

(1) Quarter Ending (check one): March 31, 2006 June 30, 2006 September 30, 2006 December 31, 2006

(2) Lobbying Firm Information
Larry J. Overton & Associates, Inc.
Name of Lobbying Firm
101 East College Ave., Suite 302
Business Address of Lobbying Firm (Street, City, State, and Zip)
Tallahassee, FL 32301
(850) 224-2859
Business Phone (including area code)

(3) List Name(s) of Firm's Lobbyists Registered during reporting period:
Overton Larry J. Last First MI
Overton Joel T. Last First MI
Overton Joel T. Last First MI
 Check if additional names are entered on another page

RECEIVED BY
LEGISLATIVE INFORMATION DIV.
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(4) Total compensation provided or owed to the lobbying firm from ALL principals during the reporting period (check appropriate box):
 \$-0- \$1 to \$49,999 \$50,000 to \$99,999 \$100,000 to \$249,999 \$250,000 to \$499,999 \$ 500,000 to \$999,999 \$1,000,000 or more

(5) For each Principal represented by the Lobbying Firm during the reporting period:

Principal Name	Business Address	Telephone	Compensation	Subcontracting	Originating Work
<u>ACS Health & Human Services</u> Full Name of Principal	<u>CC71010000 P.O. Box 981193, El Paso, TX 79998</u> Business Address of Principal	<u>(850) 201-1309</u> Telephone Number of Principal	<input type="checkbox"/> \$-0- <input checked="" type="checkbox"/> \$1 to \$9,999 <input type="checkbox"/> \$10,000 to \$19,999 <input type="checkbox"/> \$20,000 to \$29,999 <input type="checkbox"/> \$30,000 to \$39,999 <input type="checkbox"/> \$40,000 to \$49,999 <input type="checkbox"/> If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$	<input type="checkbox"/> Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	Name and address of principal originating work: <u>ACS State Healthcare</u> Full Name of Principal <u>CC71010000 P.O. Box 981193, El Paso, TX 79998</u> Business Address of Principal <u>(850) 201-1309</u> Telephone Number of Principal
<u>Active Day, Inc.</u> Full Name of Principal	<u>400 Redland Ct.#114 Owings Mills, MD 21117</u> Business Address of Principal	<u>(443) 548-2200</u> Telephone Number of Principal	<input type="checkbox"/> \$-0- <input checked="" type="checkbox"/> \$1 to \$9,999 <input type="checkbox"/> \$10,000 to \$19,999 <input type="checkbox"/> \$20,000 to \$29,999 <input type="checkbox"/> \$30,000 to \$39,999 <input type="checkbox"/> \$40,000 to \$49,999 <input type="checkbox"/> If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$	<input type="checkbox"/> Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.	Name and address of principal originating work: <u>American Society for Bariatric Surgery</u> Full Name of Principal <u>290 Southwinds Dr., Sanibel, FL 33957</u> Business Address of Principal <u>(804) 363-0311</u> Telephone Number of Principal

(6) Total compensation provided or owed to the lobbying firm for the reporting period:
 \$-0-
 \$1 to \$9,999
 \$10,000 to \$19,999
 \$20,000 to \$29,999
 \$30,000 to \$39,999
 \$40,000 to \$49,999
 If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.
Name and address of principal originating work:
Full Name of Principal
Business Address of Principal
Telephone Number of Principal

FLORIDA LEGISLATURE —LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT

PAGE 2

(5) For each Principal represented by the Lobbying Firm during the reporting period (continued from page 1):

Amerigroup Corporation

Full Name of Principal
 4200 W. Cypress St. 10th Floor, Tampa, FL 33607
 Business Address of Principal
 (813) 830-6900
 Telephone Number of Principal

Apalachee Center, Inc.

Full Name of Principal
 2634-J Capital Circle, NE - Tallahassee, FL 32308
 Business Address of Principal
 (850) 523-3208
 Telephone Number of Principal

Associated Home Health Industries of Florida, Inc.

Full Name of Principal
 1331 E. Lafayette Street, Tallahassee, FL 32301
 Business Address of Principal
 (850) 222-8967
 Telephone Number of Principal

Atlantic Dental, Inc.

Full Name of Principal
 2100 Ponce de Leon Blvd., Suite 950, Coral Gables, FL 33134
 Business Address of Principal
 (305) 7045180
 Telephone Number of Principal

(6) Total compensation provided or owed to the lobbying firm for the reporting period:
 \$-0-
 \$1 to \$9,999
 \$10,000 to \$19,999
 \$20,000 to \$29,999
 \$30,000 to \$39,999
 \$40,000 to \$49,999
 If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Total compensation provided or owed to the lobbying firm for the reporting period:
 \$-0-
 \$1 to \$9,999
 \$10,000 to \$19,999
 \$20,000 to \$29,999
 \$30,000 to \$39,999
 \$40,000 to \$49,999
 If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Total compensation provided or owed to the lobbying firm for the reporting period:
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 \$1 to \$9,999
 \$10,000 to \$19,999
 \$20,000 to \$29,999
 \$30,000 to \$39,999
 \$40,000 to \$49,999
 If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Total compensation provided or owed to the lobbying firm for the reporting period:
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 \$1 to \$9,999
 \$10,000 to \$19,999
 \$20,000 to \$29,999
 \$30,000 to \$39,999
 \$40,000 to \$49,999
 If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

() Telephone Number of Principal

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

() Telephone Number of Principal

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Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

() Telephone Number of Principal

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

() Telephone Number of Principal

Check if additional principals are listed on another page.

(7) CERTIFICATION: I hereby certify to the veracity and completeness of the information submitted herein; that no reportable compensation has been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.

Date: June 8, 2006

Signature:
 (Original Signature Required)

Title: President
 (Senior Partner, Officer, or Owner of Lobbying Firm)

FLORIDA LEGISLATURE —LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT

PAGE 2

(5) For each Principal represented by the Lobbying Firm during the reporting period (continued from page 1):

Baptist Health Care Corporation

Full Name of Principal
 1717 North E. Street, Suite 320, Pensacola, FL 32501
 Business Address of Principal
 (85ⁿ) 469-2335
 Telephone Number of Principal

Baxter Healthcare Corporation

Full Name of Principal
 One Baxter Parkway, DF3-2W, Deerfield, IL 60015
 Business Address of Principal
 (202) 508-8200
 Telephone Number of Principal

BayCare Health System, Inc.

Full Name of Principal
 601 Main Street, Dunedin, FL 34698
 Business Address of Principal
 (727) 734-6519
 Telephone Number of Principal

Boca Raton Community Hospital

Full Name of Principal
 800 Meadows Road, Boca Raton, FL 33486
 Business Address of Principal
 (561) 395-7100
 Telephone Number of Principal

(6) Total compensation provided or owed to the lobbying firm for the reporting period:

- \$-0-
- \$1 to \$9,999
- \$10,000 to \$19,999
- \$20,000 to \$29,999
- \$30,000 to \$39,999
- \$40,000 to \$49,999
- If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

 Full Name of Principal

 Business Address of Principal

() _____
 Telephone Number of Principal

Total compensation provided or owed to the lobbying firm for the reporting period:

- \$-0-
- \$1 to \$9,999
- \$10,000 to \$19,999
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Name and address of principal originating work:

 Full Name of Principal

 Business Address of Principal

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 Telephone Number of Principal

Total compensation provided or owed to the lobbying firm for the reporting period:

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Name and address of principal originating work:

 Full Name of Principal

 Business Address of Principal

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 Telephone Number of Principal

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- \$30,000 to \$39,999
- \$40,000 to \$49,999
- If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

 Full Name of Principal

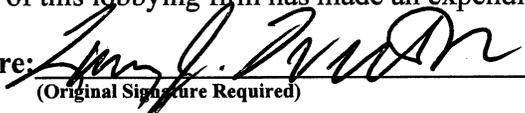
 Business Address of Principal

() _____
 Telephone Number of Principal

Check if additional principals are listed on another page.

(7) CERTIFICATION: I hereby certify to the veracity and completeness of the information submitted herein; that no reportable compensation has been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.

Date: June 8, 2006

Signature: 
 (Original Signature Required)

Title: President
 (Senior Partner, Officer, or Owner of Lobbying Firm)

FLORIDA LEGISLATURE —LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT

PAGE 2

(5) For each Principal represented by the Lobbying Firm during the reporting period (continued from page 1):

Braman Management Association

Full Name of Principal

2060 Biscayne Blvd., 2nd Floor, Miami, FL 33137

Business Address of Principal

(305) 576-1889

Telephone Number of Principal

Catholic Health Services

Full Name of Principal

110 Merick Way, Suite 3B, Coral Gables, FL 33134

Business Address of Principal

(305) 443-9162

Telephone Number of Principal

Ciber, Incorporated

Full Name of Principal

One Lincoln Center, 18 W. 140 Butterfield, Rd., #300, Oakbrook Terrace, IL 60181

Business Address of Principal

(630) 620-1322

Telephone Number of Principal

Citrus Memorial Hospital

Full Name of Principal

502 W. Highland Blvd., Inverness, FL 34452

Business Address of Principal

(352) 344-6582

Telephone Number of Principal

(6) Total compensation provided or owed to the lobbying firm for the reporting period:

\$-0-

\$1 to \$9,999

\$10,000 to \$19,999

\$20,000 to \$29,999

\$30,000 to \$39,999

\$40,000 to \$49,999

If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Total compensation provided or owed to the lobbying firm for the reporting period:

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\$30,000 to \$39,999

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\$10,000 to \$19,999

\$20,000 to \$29,999

\$30,000 to \$39,999

\$40,000 to \$49,999

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\$1 to \$9,999

\$10,000 to \$19,999

\$20,000 to \$29,999

\$30,000 to \$39,999

\$40,000 to \$49,999

If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

() _____
Telephone Number of Principal

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

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Telephone Number of Principal

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Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

() _____
Telephone Number of Principal

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

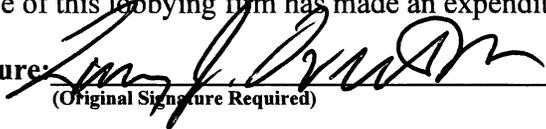
Business Address of Principal

() _____
Telephone Number of Principal

Check if additional principals are listed on another page.

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Date: June 8, 2006

Signature: 
(Original Signature Required)

Title: President
(Senior Partner, Officer, or Owner of Lobbying Firm)

FLORIDA LEGISLATURE —LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT

PAGE 2

2006 JUN 29 PM 1:50
LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION DIV.

(5) For each Principal represented by the Lobbying Firm during the reporting period (continued from page 1):

Collier Health Services

Full Name of Principal

1454 Madison Ave Immokalee, FL 33934

Business Address of Principal

(941) 657-6762

Telephone Number of Principal

Devereux Foundation

Full Name of Principal

5859 TG Lee Blvd Suite 400 Orlando, FL 32821

Business Address of Principal

(407) 812-4555

Telephone Number of Principal

ElderCare Companies, Inc

Full Name of Principal

3440 Hollywood Blvd Suite 415 Hollywood, FL 32021

Business Address of Principal

(732) 295-7600

Telephone Number of Principal

Florida Association of Health Plans, Inc

Full Name of Principal

201 East Park Ave Tallahassee, FL 32301

Business Address of Principal

(850) 386-2904

Telephone Number of Principal

(6) Total compensation provided or owed to the lobbying firm for the reporting period:

\$-0-

\$1 to \$9,999

\$10,000 to \$19,999

\$20,000 to \$29,999

\$30,000 to \$39,999

\$40,000 to \$49,999

If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

(____) _____
Telephone Number of Principal

Total compensation provided or owed to the lobbying firm for the reporting period:

\$-0-

\$1 to \$9,999

\$10,000 to \$19,999

\$20,000 to \$29,999

\$30,000 to \$39,999

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Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

(____) _____
Telephone Number of Principal

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\$30,000 to \$39,999

\$40,000 to \$49,999

If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

(____) _____
Telephone Number of Principal

Total compensation provided or owed to the lobbying firm for the reporting period:

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If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

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Name and address of principal originating work:

Full Name of Principal

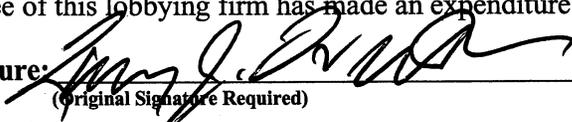
Business Address of Principal

(____) _____
Telephone Number of Principal

Check if additional principals are listed on another page.

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Date: June 8, 2006

Signature: 

(Original Signature Required)

Title: President
(Senior Partner, Officer, or Owner of Lobbying Firm)

FLORIDA LEGISLATURE —LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT

PAGE 2

2006 JUN 18 11:50
 LEGISLATIVE RESEARCH DIV.

(5) For each Principal represented by the Lobbying Firm during the reporting period (continued from page 1):

Florida Association of Homes for the Aging
Full Name of Principal

1812 Riggins Rd Tallahassee, FL 32308
Business Address of Principal

(850) 671-3700
Telephone Number of Principal

Florida Council for Behavioral Healthcare, Inc
Full Name of Principal

316 East Park Ave Tallahassee, FL 32301
Business Address of Principal

(850) 224-6048
Telephone Number of Principal

Florida Horsemen's Benevolent & Protective Association, Inc
Full Name of Principal

PO Box 1808 Opa-Locka, FL 33055-0808
Business Address of Principal

(305) 625-4591
Telephone Number of Principal

GEO Care, Inc

Full Name of Principal

621 NW 53rd St Suite 700 Boca Raton, FL 33487
Business Address of Principal

(561) 999-7741
Telephone Number of Principal

(6) Total compensation provided or owed to the lobbying firm for the reporting period:

- \$-0-
- \$1 to \$9,999
- \$10,000 to \$19,999
- \$20,000 to \$29,999
- \$30,000 to \$39,999
- \$40,000 to \$49,999
- If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

(____) _____
Telephone Number of Principal

Total compensation provided or owed to the lobbying firm for the reporting period:

- \$-0-
- \$1 to \$9,999
- \$10,000 to \$19,999
- \$20,000 to \$29,999
- \$30,000 to \$39,999
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Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

(____) _____
Telephone Number of Principal

Total compensation provided or owed to the lobbying firm for the reporting period:

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- \$1 to \$9,999
- \$10,000 to \$19,999
- \$20,000 to \$29,999
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Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

(____) _____
Telephone Number of Principal

Total compensation provided or owed to the lobbying firm for the reporting period:

- \$-0-
- \$1 to \$9,999
- \$10,000 to \$19,999
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- If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

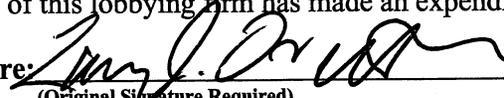
Business Address of Principal

(____) _____
Telephone Number of Principal

Check if additional principals are listed on another page.

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Date: June 8, 2006

Signature: 
(Original Signature Required)

Title: President
(Senior Partner, Officer, or Owner of Lobbying Firm)

FLORIDA LEGISLATURE —LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT

PAGE 2

(5) For each Principal represented by the Lobbying Firm during the reporting period (continued from page 1):

Healthcare Management Systems, Inc

Full Name of Principal

2500 SW 75th Ave Miami, FL 33155

Business Address of Principal

(80ⁿ) 767-5551

Telephone Number of Principal

HealthExcel

Full Name of Principal

1560 Sawgrass Corp Pkwy Suite 4 Sunrise, FL 33323

Business Address of Principal

(305) 20-1632

Telephone Number of Principal

The Henry & Rilla White Foundation

Full Name of Principal

2629 Mitcham Dr Tallahassee, FL 32308

Business Address of Principal

(850) 922-8375

Telephone Number of Principal

Hope of Southwest Florida, Inc

Full Name of Principal

9470 Health Park Circle Ft Myers, FL 33908

Business Address of Principal

(239) 489-9140

Telephone Number of Principal

(6) Total compensation provided or owed to the lobbying firm for the reporting period:

\$-0-

\$1 to \$9,999

\$10,000 to \$19,999

\$20,000 to \$29,999

\$30,000 to \$39,999

\$40,000 to \$49,999

If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

() Telephone Number of Principal

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Name and address of principal originating work:

Full Name of Principal

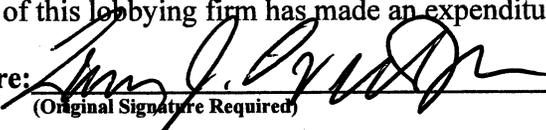
Business Address of Principal

() Telephone Number of Principal

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Date: June 8, 2006

Signature: 
(Original Signature Required)

Title: President
(Senior Partner, Officer, or Owner of Lobbying Firm)

2006 JUN 13 1:53
LEGISLATIVE INFORMATION DIV.

FLORIDA LEGISLATURE —LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT

PAGE 2

2006 JUN 16 11:59
LEGISLATIVE BRANCH LOBBYING DIV

(5) For each Principal represented by the Lobbying Firm during the reporting period (continued from page 1):

Hospitalist of America

Full Name of Principal

2121 Ponce de Leon Blvd Suite 300 Coral Gables, FL 33134
Business Address of Principal

(305) 704-5180
Telephone Number of Principal

Isabel Collier Read Immokalee Health Park

Full Name of Principal

PO Box 727 Naples, FL 33939
Business Address of Principal

239, 657-6762
Telephone Number of Principal

J. Patrick Fitzgerald, PA

Full Name of Principal

110 Merick Way Suite 3B Coral Gables, FL 33134
Business Address of Principal

(305) 443-9162
Telephone Number of Principal

Kindred Healthcare Hospital Division

Full Name of Principal

East Regional Office 8751 W Broward Blvd. Plantation, FL 33324
Business Address of Principal

954, 693-4550
Telephone Number of Principal

(6) Total compensation provided or owed to the lobbying firm for the reporting period:
 \$-0-
 \$1 to \$9,999
 \$10,000 to \$19,999
 \$20,000 to \$29,999
 \$30,000 to \$39,999
 \$40,000 to \$49,999
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 \$30,000 to \$39,999
 \$40,000 to \$49,999
 If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Total compensation provided or owed to the lobbying firm for the reporting period:
 \$-0-
 \$1 to \$9,999
 \$10,000 to \$19,999
 \$20,000 to \$29,999
 \$30,000 to \$39,999
 \$40,000 to \$49,999
 If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Total compensation provided or owed to the lobbying firm for the reporting period:
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 \$1 to \$9,999
 \$10,000 to \$19,999
 \$20,000 to \$29,999
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 \$40,000 to \$49,999
 If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

() _____
Telephone Number of Principal

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

() _____
Telephone Number of Principal

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

() _____
Telephone Number of Principal

Name and address of principal originating work:

Full Name of Principal

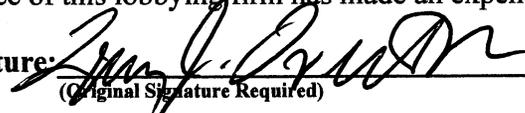
Business Address of Principal

() _____
Telephone Number of Principal

Check if additional principals are listed on another page.

(7) CERTIFICATION: I hereby certify to the veracity and completeness of the information submitted herein; that no reportable compensation has been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.

Date: June 8, 2006

Signature: 
(Original Signature Required)

Title: President
(Senior Partner, Officer, or Owner of Lobbying Firm)

FLORIDA LEGISLATURE —LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT

PAGE 2

(5) For each Principal represented by the Lobbying Firm during the reporting period (continued from page 1):

Life Management Center of Northwest Florida, Inc
Full Name of Principal

525 E 15th St Panama City, FL 32405
Business Address of Principal

(850) 769-9481
Telephone Number of Principal

LifeStream Behavioral Center
Full Name of Principal

515 W Main St Leesburg, FL 34748
Business Address of Principal

(352) 315-7506
Telephone Number of Principal

Memorial Healthcare Systems
Full Name of Principal

3501 Johnson St Hollywood, FL 33021
Business Address of Principal

(954) 985-3451
Telephone Number of Principal

Mental Health Care, Inc
Full Name of Principal

5707 N 22nd St Tampa, FL 813
Business Address of Principal

(813) 272-2244
Telephone Number of Principal

(6) Total compensation provided or owed to the lobbying firm for the reporting period:

- \$-0-
 \$1 to \$9,999
 \$10,000 to \$19,999
 \$20,000 to \$29,999
 \$30,000 to \$39,999
 \$40,000 to \$49,999
 If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____

Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

() _____
Telephone Number of Principal

Total compensation provided or owed to the lobbying firm for the reporting period:

- \$-0-
 \$1 to \$9,999
 \$10,000 to \$19,999
 \$20,000 to \$29,999
 \$30,000 to \$39,999
 \$40,000 to \$49,999
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Business Address of Principal

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Telephone Number of Principal

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Full Name of Principal

Business Address of Principal

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Telephone Number of Principal

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Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

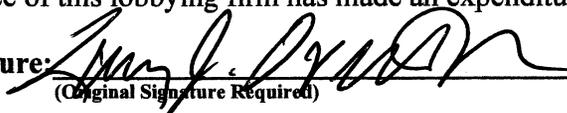
() _____
Telephone Number of Principal

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RECEIVED BY INFORMATION DIV.

Check if additional principals are listed on another page.

(7) CERTIFICATION: I hereby certify to the veracity and completeness of the information submitted herein; that no reportable compensation has been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.

Date: June 8, 2006

Signature: 
(Original Signature Required)

Title: President
(Senior Partner, Officer, or Owner of Lobbying Firm)

FLORIDA LEGISLATURE —LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT

PAGE 2

(5) For each Principal represented by the Lobbying Firm during the reporting period (continued from page 1):

Mercy Hospital, Inc

Full Name of Principal
3663 S Miami Miami, FL 33133
 Business Address of Principal
(305) 285-2121
 Telephone Number of Principal

Mount Sinai Medical Center

Full Name of Principal
4300 Alton Rd Miami Beach, FL 33140
 Business Address of Principal
(305) 674-2520
 Telephone Number of Principal

Munroe Regional Medical Center

Full Name of Principal
313 SW 15th St Ocala, FL 34471
 Business Address of Principal
(352) 351-7393
 Telephone Number of Principal

New Horizons of the Treasure Coast, Inc

Full Name of Principal
4500 W Midway Rd Ft. Pierce, FL 34981
 Business Address of Principal
(772) 468-4073
 Telephone Number of Principal

(6) Total compensation provided or owed to the lobbying firm for the reporting period:

- \$-0-
- \$1 to \$9,999
- \$10,000 to \$19,999
- \$20,000 to \$29,999
- \$30,000 to \$39,999
- \$40,000 to \$49,999
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Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

() Telephone Number of Principal

Total compensation provided or owed to the lobbying firm for the reporting period:

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- \$1 to \$9,999
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Business Address of Principal

() Telephone Number of Principal

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Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

() Telephone Number of Principal

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LEGISLATIVE INFORMATION DIV.

Check if additional principals are listed on another page.

(7) CERTIFICATION: I hereby certify to the veracity and completeness of the information submitted herein; that no reportable compensation has been omitted; and that no officer or employee of this lobbying firm has made an expenditure in violation of Section 11.045, F.S.

Date: June 8, 2006

Signature: 
 (Original Signature Required)

Title: President
 (Senior Partner, Officer, or Owner of Lobbying Firm)

FLORIDA LEGISLATURE —LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT

PAGE 2

(5) For each Principal represented by the Lobbying Firm during the reporting period (continued from page 1):

Sheridan Healthcare, Inc

Full Name of Principal
 201 S Biscayne Blvd 22ndFloor Miami, FL 33133
 Business Address of Principal
 (954) 838-2769
 Telephone Number of Principal

South Broward Hospital District

Full Name of Principal
 3501 Johnson St Hollywood, FL 33021
 Business Address of Principal
 (954) 985-3451
 Telephone Number of Principal

UAFC

Full Name of Principal
 3050 Universal Blvd Suite 150 Weston, FL 33331
 Business Address of Principal
 (954) 888-4910
 Telephone Number of Principal

University of Miami

Full Name of Principal
 1252 Memorial Dr Locator 1210 Coral Gables, FL 33146
 Business Address of Principal
 (305) 284-5155
 Telephone Number of Principal

(6) Total compensation provided or owed to the lobbying firm for the reporting period:
 \$-0-
 \$1 to \$9,999
 \$10,000 to \$19,999
 \$20,000 to \$29,999
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 \$1 to \$9,999
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 \$1 to \$9,999
 \$10,000 to \$19,999
 \$20,000 to \$29,999
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Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.

Name and address of principal originating work:

 Full Name of Principal

 Business Address of Principal

 () _____
 Telephone Number of Principal

Name and address of principal originating work:

 Full Name of Principal

 Business Address of Principal

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 Business Address of Principal

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Date: June 8, 2006

Signature: 
 (Original Signature Required)

Title: President
 (Senior Partner, Officer, or Owner of Lobbying Firm)

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 LEGISLATIVE BRANCH

FLORIDA LEGISLATURE —LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT

PAGE 2

(5) For each Principal represented by the Lobbying Firm during the reporting period (continued from page 1):

Oakwood Center of the Palm Beaches, Inc

Full Name of Principal

1041 45th St West Palm Beach, FL 33407

Business Address of Principal

(561) 383-5811

Telephone Number of Principal

Pharmed Group

Full Name of Principal

3075 NW 107 Ave Miami, FL 33172

Business Address of Principal

(305) 592-2324

Telephone Number of Principal

Pine Creek Healthcare Capital LLC

Full Name of Principal

2525 W End Ave Suite 750 Nashville, TN 37203

Business Address of Principal

(615) 340-5505

Telephone Number of Principal

Shands Teaching Hospitals & Clinics, Inc dba Shands Healthcare

Full Name of Principal

PO Box 100302 Gainesville, FL 32610-0302

Business Address of Principal

(352) 265-6995

Telephone Number of Principal

(6) Total compensation provided or owed to the lobbying firm for the reporting period:

\$-0-

\$1 to \$9,999

\$10,000 to \$19,999

\$20,000 to \$29,999

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Name and address of principal originating work:

Full Name of Principal

Business Address of Principal

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\$10,000 to \$19,999

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Business Address of Principal

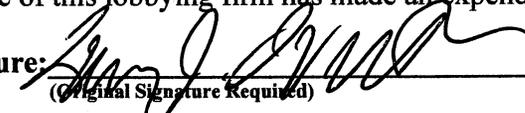
() Telephone Number of Principal

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Check if additional principals are listed on another page.

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Signature: 
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Title: President
 (Senior Partner, Officer, or Owner of Lobbying Firm)

FLORIDA LEGISLATURE —LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT

PAGE 2

(5) For each Principal represented by the Lobbying Firm during the reporting period (continued from page 1):

WellCare Health Plans, Inc

Full Name of Principal
 6800 N Dale Mabry Hwy Suite 268 Tampa, FL 33614
 Business Address of Principal
 (813) 290-6316
 Telephone Number of Principal

Youth and Family Centered Services of Florida, Inc

Full Name of Principal
 12012 Boyette Rd Riverview, FL 33569
 Business Address of Principal
 (813) 677-6700
 Telephone Number of Principal

Full Name of Principal
 Business Address of Principal
 Telephone Number of Principal

Full Name of Principal
 Business Address of Principal
 Telephone Number of Principal

(6) Total compensation provided or owed to the lobbying firm for the reporting period:
 \$-0-
 \$1 to \$9,999
 \$10,000 to \$19,999
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Name and address of principal originating work:

Full Name of Principal

Full Name of Principal

Full Name of Principal

Full Name of Principal

Business Address of Principal

Business Address of Principal

Business Address of Principal

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