

HAND DELIVERED BY Dorinda Lopez  
DATE 6/18/06 TIME \_\_\_\_\_

# 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  
Robert M. Levy & Associates, Inc.  
Name of Lobbying Firm  
780 N.E. 69th St. #1703  
Business Address of Lobbying Firm (Street, City, State, and Zip)  
Miami, FL 33138  
Business Address of Lobbying Firm (Street, City, State, and Zip)  
(555) 681-0254  
Business Phone (including area code)

(3) List Name(s) of Firm's Lobbyists Registered during reporting period:  
Diaz Jose Last First MI Last MI  
Philyaw Ryan Last First MI Last First MI  
Levy Robert M Last First MI Last First MI  
 Check if additional names are entered on another page

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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:

Access Health Risk Management  
Full Name of Principal  
Business Address of Principal  
Telephone Number of Principal

Actor's Playhouse  
Full Name of Principal  
280 Miracle Mile Coral Gables, FL  
Business Address of Principal 33134  
(555) 444-9293  
Telephone Number of Principal

Advertising Federation of Miami  
Full Name of Principal  
2030 SW 110th Ave. Miami, FL  
Business Address of Principal 33165  
(555) 552-8111  
Telephone Number of Principal

American Association for Nude Recreation  
Full Name of Principal  
1703 N. Main St. Suite E Kissimmee, FL  
Business Address of Principal 34744  
(800) 879-6833  
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:  
 \$-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: \$ \_\_\_\_\_

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

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

FLORIDA LEGISLATURE —LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT

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

|   |  |  |  |
|---|--|--|--|
| <p><u>Association for Retarded Citizens of FL</u><br/>Full Name of Principal</p> <p><u>2898 Motor Dr. Suite 1 Tallahassee FL 32308</u><br/>Business Address of Principal</p> <p><u>(850) 921-0400</u><br/>Telephone Number of Principal</p> | <p><u>Association of Government Supervisors</u><br/>Full Name of Principal</p> <p><u>11340 Interchange Circle N. Miramar, FL 33025</u><br/>Business Address of Principal</p> <p><u>(35) 477-9644</u><br/>Telephone Number of Principal</p> | <p><u>Baptist Health South Florida</u><br/>Full Name of Principal</p> <p><u>6855 Reel Rd. Suite 600 Coral Gables, FL 33143</u><br/>Business Address of Principal</p> <p><u>(305) 596-1960 x.6285</u><br/>Telephone Number of Principal</p> | <p><u>Catalans Nurses Registry</u><br/>Full Name of Principal</p> <p><u>419 W. 49th St. Suite 200 Hialeah, FL 33122</u><br/>Business Address of Principal</p> <p><u>(305) 821-1262</u><br/>Telephone Number of Principal</p> |
|---|--|--|--|

(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

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

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

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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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: 5/15/06

Signature: [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):

City of Florida City  
Full Name of Principal  
404 W. Palm Ave FL City, FL  
Business Address of Principal 33084  
(85) 247-8221  
Telephone Number of Principal

City of Homestead  
Full Name of Principal  
790 W. Homestead Blvd Homestead,  
Business Address of Principal FL 33080  
(85) 224-4400  
Telephone Number of Principal

City of Miami Beach  
Full Name of Principal  
1700 Convention Center Dr. Miami  
Business Address of Principal Beach, FL  
33139  
(85) 673-7010  
Telephone Number of Principal

Community Health of South Dade  
Full Name of Principal  
1030 SW 2110<sup>th</sup> St. Miami, FL 33138  
Business Address of Principal  
(85) 254-4912  
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:  
 \$-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: \$ \_\_\_\_\_

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

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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

Full Name of Principal

Gary Rutledge  
Full Name of Principal

Full Name of Principal

Business Address of Principal

Business Address of Principal

215 S. Monroe St. Suite 400  
Business Address of Principal Tallahassee FL

Business Address of Principal

Telephone Number of Principal

Telephone Number of Principal

(85) 681-6788  
Telephone Number 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: 5/15/06

Signature: [Signature]  
(Original Signature Required)

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

FLORIDA LEGISLATURE —LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT

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

Community Newspapers, Inc.  
Full Name of Principal  
P.O. Box 792 Athens, GA 30603  
Business Address of Principal  
(800) 220-0092  
Telephone Number of Principal

Farm Share  
Full Name of Principal  
200 N. Krome Ave. Bldg. 12 Florida City, FL 33084  
Business Address of Principal  
(305) 240-3270  
Telephone Number of Principal

Federation of Straight Chimpanzees & Organizations  
Full Name of Principal  
2270 Watersong Rd. Hellertown, PA 18055  
Business Address of Principal  
(610) 621-9856  
Telephone Number of Principal

Financial Service Centers of Florida  
Full Name of Principal  
631 Cape Coral Pkwy. E. Cape Coral, FL 33904  
Business Address of Principal  
(941) 540-2400  
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:  
 \$-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: \$ \_\_\_\_\_

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

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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

Full Name of Principal

Full Name of Principal

Full Name of Principal

Business Address of Principal

Business Address of Principal

Business Address 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: 5/15/02

Signature: [Signature]  
(Original Signature Required)

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

**FLORIDA LEGISLATURE —LEGISLATIVE BRANCH LOBBYING QUARTERLY COMPENSATION REPORT**

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

|   |   |   |   |
|---|---|---|---|
| <p><u>Florida Association for Nude Recreation</u><br/>Full Name of Principal</p> <p><u>12 Lakewood Dr. Pierson, FL 32180</u><br/>Business Address of Principal</p> <p><u>386) 749-3404 ex. 11</u><br/>Telephone Number of Principal</p>   | <p><u>Florida Association of Professional Process Servers</u><br/>Full Name of Principal</p> <p><u>PO Box 510549 Melbourne Beach, FL 32961</u><br/>Business Address of Principal</p> <p><u>321) 728-0641</u><br/>Telephone Number of Principal</p>  | <p><u>Florida Movers &amp; Warehousemen Association</u><br/>Full Name of Principal</p> <p><u>335 Beard St Tallahassee, FL 32303</u><br/>Business Address of Principal</p> <p><u>850) 222-6000</u><br/>Telephone Number of Principal</p>   | <p><u>Florida Nurses Association</u><br/>Full Name of Principal</p> <p><u>P.O. Box 520985 Orlando, FL 32853</u><br/>Business Address of Principal</p> <p><u>(407) 896-3201</u><br/>Telephone Number of Principal</p>  |
| <p>(6) Total compensation provided or owed to the lobbying firm for the reporting period:</p> <p><input type="checkbox"/> \$-0-</p> <p><input checked="" type="checkbox"/> \$1 to \$9,999</p> <p><input type="checkbox"/> \$10,000 to \$19,999</p> <p><input type="checkbox"/> \$20,000 to \$29,999</p> <p><input type="checkbox"/> \$30,000 to \$39,999</p> <p><input type="checkbox"/> \$40,000 to \$49,999</p> <p><input type="checkbox"/> If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____</p> <p><input type="checkbox"/> Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.</p> <p>Name and address of principal originating work:</p> <p>_____<br/>Full Name of Principal</p> <p>_____<br/>Business Address of Principal</p> <p>( ) _____<br/>Telephone Number of Principal</p> | <p>Total compensation provided or owed to the lobbying firm for the reporting period:</p> <p><input type="checkbox"/> \$-0-</p> <p><input checked="" type="checkbox"/> \$1 to \$9,999</p> <p><input type="checkbox"/> \$10,000 to \$19,999</p> <p><input type="checkbox"/> \$20,000 to \$29,999</p> <p><input type="checkbox"/> \$30,000 to \$39,999</p> <p><input type="checkbox"/> \$40,000 to \$49,999</p> <p><input type="checkbox"/> If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____</p> <p><input type="checkbox"/> Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.</p> <p>Name and address of principal originating work:</p> <p>_____<br/>Full Name of Principal</p> <p>_____<br/>Business Address of Principal</p> <p>( ) _____<br/>Telephone Number of Principal</p> | <p>Total compensation provided or owed to the lobbying firm for the reporting period:</p> <p><input type="checkbox"/> \$-0-</p> <p><input checked="" type="checkbox"/> \$1 to \$9,999</p> <p><input type="checkbox"/> \$10,000 to \$19,999</p> <p><input type="checkbox"/> \$20,000 to \$29,999</p> <p><input type="checkbox"/> \$30,000 to \$39,999</p> <p><input type="checkbox"/> \$40,000 to \$49,999</p> <p><input type="checkbox"/> If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____</p> <p><input type="checkbox"/> Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.</p> <p>Name and address of principal originating work:</p> <p>_____<br/>Full Name of Principal</p> <p>_____<br/>Business Address of Principal</p> <p>( ) _____<br/>Telephone Number of Principal</p> | <p>Total compensation provided or owed to the lobbying firm for the reporting period:</p> <p><input type="checkbox"/> \$-0-</p> <p><input checked="" type="checkbox"/> \$1 to \$9,999</p> <p><input type="checkbox"/> \$10,000 to \$19,999</p> <p><input type="checkbox"/> \$20,000 to \$29,999</p> <p><input type="checkbox"/> \$30,000 to \$39,999</p> <p><input type="checkbox"/> \$40,000 to \$49,999</p> <p><input type="checkbox"/> If \$50,000 or more, provide specific dollar amount rounded up or down to nearest \$1,000: \$ _____</p> <p><input type="checkbox"/> Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.</p> <p>Name and address of principal originating work:</p> <p>_____<br/>Full Name of Principal</p> <p>_____<br/>Business Address of Principal</p> <p>( ) _____<br/>Telephone Number of Principal</p> |

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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: 5/15/06 Signature: [Signature] Title: President  
 (Original Signature Required) (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):

|  |  |  |  |
|--|--|--|--|
| <p><u>Health Council of South Florida</u><br/>Full Name of Principal</p> <p><u>8095 NW 12th St. Suite 300 Miami, FL 33126</u><br/>Business Address of Principal</p> <p><u>(305) 592-1462</u><br/>Telephone Number of Principal</p> | <p><u>Lineberger Gogson Blair &amp; Sampson, LLP</u><br/>Full Name of Principal</p> <p><u>1949 S. IH 35 Austin, Texas 78741</u><br/>Business Address of Principal</p> <p><u>(512) 447-6675</u><br/>Telephone Number of Principal</p> | <p><u>Metro Dale Auto Tag Dealers Association</u><br/>Full Name of Principal</p> <p><u>18055 S. Dixie Hwy, Miami, FL 33157-0804</u><br/>Business Address of Principal</p> <p><u>(305) 252-1009</u><br/>Telephone Number of Principal</p> | <p><u>Miami Beach Community Mental Health Center</u><br/>Full Name of Principal</p> <p><u>791 Lincoln Rd. Miami Beach, FL 33139</u><br/>Business Address of Principal</p> <p><u>(305) 531-5341 ex. 133</u><br/>Telephone Number of Principal</p> |
|--|--|--|--|

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

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

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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

Full Name of Principal

Full Name of Principal

Full Name of Principal

Business Address of Principal

Business Address of Principal

Business Address 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: 5/15/06

Signature: [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):

Miami Children's Museum  
Full Name of Principal

980 McArthur Cswy Miami, FL 33132  
Business Address of Principal

305 373-5437  
Telephone Number of Principal

Miami Jewish Home & Hospital for the Aged  
Full Name of Principal

5800 NE 2nd Ave Miami, FL 33137  
Business Address of Principal

954 525-0955  
Telephone Number of Principal

Miami River Marine Group  
Full Name of Principal

3033 NW N. River Drive Miami 33142  
Business Address of Principal

305 637-7977  
Telephone Number of Principal

Miami Shores Village  
Full Name of Principal

10550 NE 2nd Ave Miami Shores 33138  
Business Address of Principal

305 795-2207  
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
- 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
- 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
- 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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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: 5/15/06

Signature: [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):

National Guild of Hypnotists  
Full Name of Principal  
PO Box 308 Merrimack, NH 03054  
Business Address of Principal  
603-429-9438  
Telephone Number of Principal

New World School of the Arts  
Full Name of Principal  
25 NE 2nd St. Miami 33132  
Business Address of Principal  
305-237-3135  
Telephone Number of Principal

North Dade Chamber of Commerce  
Full Name of Principal  
18350 NW 2nd Ave. Suite 100 Miami 33119  
Business Address of Principal  
305-690-9123  
Telephone Number of Principal

Office of Professional Employees, International Union  
Full Name of Principal  
265 W 141st St. 6th Floor New York, NY 10011  
Business Address of Principal  
212-340-7348  
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:  
 \$-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: \$ \_\_\_\_\_

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

Full Name of Principal

Full Name of Principal

Full Name of Principal

Business Address of Principal

Business Address of Principal

Business Address 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: 9/15/06

Signature: [Signature]  
(Original Signature Required)

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

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**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):

|  |  |  |   |
|--|--|--|---|
| <p><u>Private Care Association</u><br/>Full Name of Principal</p> <p><u>335 Beard St. Tallahassee, FL 32304</u><br/>Business Address of Principal</p> <p><u>(850) 222-6000</u><br/>Telephone Number of Principal</p> | <p><u>Professional Water operators of Florida</u><br/>Full Name of Principal</p> <p><u>1718 Edgewater Dr. Orlando, FL 32804</u><br/>Business Address of Principal</p> <p><u>(407) 296-3316</u><br/>Telephone Number of Principal</p> | <p><u>Security Biometrics</u><br/>Full Name of Principal</p> <p><u>5655 Collins Ave. Suite 3J Miami Beach, FL 33140</u><br/>Business Address of Principal</p> <p><u>(305) 992-8481</u><br/>Telephone Number of Principal</p> | <p><u>Setlin &amp; Co. Insurance</u><br/>Full Name of Principal</p> <p><u>6700 N. Andrews Ave. Suite 300 Ft. Lauderdale, FL 33309</u><br/>Business Address of Principal</p> <p><u>(954) 938-8788 x. 81000</u><br/>Telephone Number of Principal</p> |
|--|--|--|---|

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

|  |  |  |  |
|--|--|--|--|
| <p><input type="checkbox"/> Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.</p> | <p><input type="checkbox"/> Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.</p> | <p><input type="checkbox"/> Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.</p> | <p><input type="checkbox"/> Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal.</p> |
|--|--|--|--|

|   |   |   |   |
|---|---|---|---|
| <p>Name and address of principal originating work:</p> <p>_____</p> <p>Full Name of Principal</p> <p>_____</p> <p>Business Address of Principal</p> <p>( ) _____</p> <p>Telephone Number of Principal</p> | <p>Name and address of principal originating work:</p> <p>_____</p> <p>Full Name of Principal</p> <p>_____</p> <p>Business Address of Principal</p> <p>( ) _____</p> <p>Telephone Number of Principal</p> | <p>Name and address of principal originating work:</p> <p>_____</p> <p>Full Name of Principal</p> <p>_____</p> <p>Business Address of Principal</p> <p>( ) _____</p> <p>Telephone Number of Principal</p> | <p>Name and address of principal originating work:</p> <p>_____</p> <p>Full Name of Principal</p> <p>_____</p> <p>Business Address of Principal</p> <p>( ) _____</p> <p>Telephone Number of Principal</p> |
|---|---|---|---|

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: 5/15/06 Signature: [Signature] Title: President  
 (Original Signature Required) (Senior Partner, Officer, or Owner of Lobbying Firm)

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**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):

SMH/ Homestead Hospital  
Full Name of Principal

100 NW 13th St Homestead, FL 33030  
Business Address of Principal

(35) 242 - 3535  
Telephone Number of Principal

S. FL Food Recovery Project  
Full Name of Principal

17011 NE 19th Ave North Miami Beach, FL 33162  
Business Address of Principal

(35) 891 - 8811  
Telephone Number of Principal

S. FL Leisure & Entertainment Association  
Full Name of Principal

1522 S. Pine Island Blvd. Coral Gables, FL 33134  
Business Address of Principal

(35) 443 - 3000  
Telephone Number of Principal

South FL Taxi Association  
Full Name of Principal

P.O. Box 420769 Miami, FL 33242-0769  
Business Address of Principal

(305) 987 - 7385  
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  
 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  
 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  
 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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Check if additional principals are listed on another page.

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Date: 5/15/06

Signature: [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):

South Miami Hospital  
Full Name of Principal

6850 SW 73<sup>rd</sup> St. Miami, FL 33143  
Business Address of Principal

305 6061 - 4611  
Telephone Number of Principal

SE Florida Apartment Association  
Full Name of Principal

1650 S. Dixie Hwy Suite 500 Boca Raton, FL 33432  
Business Address of Principal

(888) 447 - 7808  
Telephone Number of Principal

Teaching Nursing Home  
Full Name of Principal

1601 NW 110<sup>th</sup> St Miami, FL 33125  
Business Address of Principal

305 575 - 3388  
Telephone Number of Principal

United Cerebral Palsy  
Full Name of Principal

411 NW 14<sup>th</sup> Ave. Miami, FL 33125  
Business Address of Principal

305 325 - 1313  
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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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
- \$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:

- \$-0-
- \$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.

Name and address of principal originating work:

\_\_\_\_\_  
Full Name of Principal

\_\_\_\_\_  
Business Address of Principal

( ) \_\_\_\_\_  
Telephone Number of Principal

LEGISLATIVE INFORMATION DIV  
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Date: 5/15/06

Signature: [Signature]  
(Original Signature Required)

Title: [Signature]  
(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):

|   |  |   |  |
|---|--|---|--|
| <u>Vietnam Veterans Association, Florida</u><br>Full Name of Principal <u>State Council</u> | <u>Village of Islamorada</u><br>Full Name of Principal                         | <u>Village of Palmetto Bay</u><br>Full Name of Principal                                | <u>Yellow Cab of Miami</u><br>Full Name of Principal                           |
| <u>P.O. Box 70809 St. Cloud, FL</u><br>Business Address of Principal <u>34770</u>           | <u>PO Box 508 Islamorada, FL</u><br>Business Address of Principal <u>33036</u> | <u>8950 SW 152nd St. Palmetto Bay, FL</u><br>Business Address of Principal <u>33157</u> | <u>3000 NW 37th Ct Miami, FL</u><br>Business Address of Principal <u>33142</u> |
| <u>(321) 784-2472</u><br>Telephone Number of Principal                                      | <u>(351) 664-2345 ex 233</u><br>Telephone Number of Principal                  | <u>(351) 259-1234</u><br>Telephone Number of Principal                                  | <u>(351) 662-3775</u><br>Telephone Number of Principal                         |

|  |  |  |  |
|--|--|--|--|
| (6) Total compensation provided or owed to the lobbying firm for the reporting period:<br><input checked="" type="checkbox"/> \$-0-<br><input type="checkbox"/> \$1 to \$9,999<br><input type="checkbox"/> \$10,000 to \$19,999<br><input type="checkbox"/> \$20,000 to \$29,999<br><input type="checkbox"/> \$30,000 to \$39,999<br><input type="checkbox"/> \$40,000 to \$49,999<br><input type="checkbox"/> 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:<br><input type="checkbox"/> \$-0-<br><input checked="" type="checkbox"/> \$1 to \$9,999<br><input type="checkbox"/> \$10,000 to \$19,999<br><input type="checkbox"/> \$20,000 to \$29,999<br><input type="checkbox"/> \$30,000 to \$39,999<br><input type="checkbox"/> \$40,000 to \$49,999<br><input type="checkbox"/> 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:<br><input type="checkbox"/> \$-0-<br><input checked="" type="checkbox"/> \$1 to \$9,999<br><input type="checkbox"/> \$10,000 to \$19,999<br><input type="checkbox"/> \$20,000 to \$29,999<br><input type="checkbox"/> \$30,000 to \$39,999<br><input type="checkbox"/> \$40,000 to \$49,999<br><input type="checkbox"/> 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:<br><input checked="" type="checkbox"/> \$-0-<br><input type="checkbox"/> \$1 to \$9,999<br><input type="checkbox"/> \$10,000 to \$19,999<br><input type="checkbox"/> \$20,000 to \$29,999<br><input type="checkbox"/> \$30,000 to \$39,999<br><input type="checkbox"/> \$40,000 to \$49,999<br><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. | <input type="checkbox"/> Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal. | <input checked="" type="checkbox"/> Check if this compensation was received from a lobbying firm subcontracting work on behalf of a principal. | <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:<br>_____<br>Full Name of Principal<br>_____<br>Business Address of Principal<br>_____<br>Telephone Number of Principal | Name and address of principal originating work:<br>_____<br>Full Name of Principal<br>_____<br>Business Address of Principal<br>_____<br>Telephone Number of Principal | Name and address of principal originating work:<br><u>Ronald C. Book, P.A.</u><br>Full Name of Principal<br><u>2999 NE 19th St. PH 6</u><br>Business Address of Principal <u>Aventura, FL</u><br><u>(305) 935-1800</u><br>Telephone Number of Principal <u>33180</u> | Name and address of principal originating work:<br>_____<br>Full Name of Principal<br>_____<br>Business Address of Principal<br>_____<br>Telephone Number of Principal |
|--|--|--|--|

2006 JUN 19 AM 9:37 RECEIVED BY REGISTRATION

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: 5/15/06 Signature: [Signature] Title: President  
(Original Signature Required) (Senior Partner, Officer, or Owner of Lobbying Firm)