



LEE COUNTY
SOUTHWEST FLORIDA

ANNUAL LOBBYIST REGISTRATION

FOR THE PERIOD JULY 1, 2014 THRU JUNE 30, 2015

NAME PETER L. QUASINS PHONE 239-465-1556
MAILING ADDRESS 4580 LITTLE RIVER LN. FORT MYERS, FL 33905

LIST THE NAME AND BUSINESS ADDRESS OF EACH PRINCIPAL REPRESENTED, THEIR GENERAL AND SPECIFIC AREAS OF LEGISLATIVE INTEREST, AND THE NATURE AND EXTENT OF ANY DIRECT BUSINESS ASSOCIATION OR PARTNERSHIP WITH ANY CURRENT MEMBER OF THE BOARD OF COUNTY COMMISSIONERS, COUNTY STAFF, OR PERSON SITTING ON A DECISION-MAKING BODY UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS WITH THE PRINCIPAL.

(1) NAME Audubon of the Western Everglades
ADDRESS 1020 8th AVE S SW TP 2 Naples, FL 34102

AREAS OF LEGISLATIVE INTEREST: ASSOCIATION WITH COMMISSIONERS, COUNTY STAFF OR MEMBERS OF DECISION-MAKING BODIES UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS.

(2) NAME _____
ADDRESS _____

AREAS OF LEGISLATIVE INTEREST: ASSOCIATION WITH COMMISSIONERS, COUNTY STAFF OR MEMBERS OF DECISION-MAKING BODIES UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS.

(3) NAME _____
ADDRESS _____

AREAS OF LEGISLATIVE INTEREST: ASSOCIATION WITH COMMISSIONERS, COUNTY STAFF OR MEMBERS OF DECISION-MAKING BODIES UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS.

(4) NAME _____
ADDRESS _____

AREAS OF LEGISLATIVE INTEREST: ASSOCIATION WITH COMMISSIONERS, COUNTY STAFF OR MEMBERS OF DECISION-MAKING BODIES UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS.

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(USE ADDITIONAL PAGES IF NECESSARY)

STATE OF FLORIDA
COUNTY OF LEE

I HEREBY CERTIFY that the statements made above are true and accurate. I further certify and acknowledge that I understand that it is my responsibility to file my annual and quarterly statements and that I will not be notified by the Clerk's Office of my failure to do so.

DATED this 31 day of Dec. 2014

[Signature]
LOBBYIST

NOTE: This document must be witnessed by either the Deputy Clerk or a Notary Public.

WITNESSED:

The foregoing instrument was signed and acknowledged before me
this _____ day of _____
who produced the following as identification _____
or is personally known to me, and who did/did not take an oath. [Stamp or Seal]

[Signature]
[Signature of Notary]
Jesse Bencivenga
[Typed or Printed Name of Notary]

Deputy Clerk

