



LEE COUNTY
SOUTHWEST FLORIDA

ANNUAL LOBBYIST REGISTRATION

FOR THE PERIOD JULY 1, 2017 THRU JUNE 30, 2018

NAME John Gucciardo / J Gucciardo Consulting LLC PHONE 239-989-5169

MAILING ADDRESS 177 Dundee Rd. Fort Myers Beach FL 33931

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 T.P.I. Hospitality

ADDRESS 103 15th Ave. N.E. Suite 200 Willmar Minn. 56201

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

project development

(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.

(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 _____ day of _____, _____

LOBBYIST

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

WITNESSED:

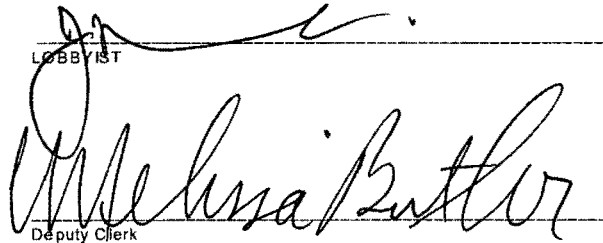
The foregoing instrument was signed and acknowledged before me

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]


Deputy Clerk

[Signature of Notary]

[Typed or Printed Name of Notary]

2018 OCT -1 AM 9:30

RECEIVED
MINUTES OFFICE



QUARTERLY LOBBYIST STATEMENT

FOR THE PERIOD 7-1-18 THRU 9-30-18

NAME John Gucciardo / 5 Gucciardo Consulting LLC PHONE 239-989-5169

MAILING ADDRESS 177 Dundee Rd - FMB F1 33931

(1) PRINCIPAL T.P.I. Hospitality William Mraz 56207

EXPENDITURES MADE ON BEHALF OF PRINCIPAL \$ NONE

SOURCE OF FUNDS N/A

PURPOSE AND SUBJECT OF LOBBYING ACTIVITIES project development

THE INDIVIDUAL (COMMISSION, COUNTY EMPLOYEE, OR PERSON ON A DECISION-MAKING BODY UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS LOBBIED county manager / county assy. admin staff.

(2) PRINCIPAL

EXPENDITURES MADE ON BEHALF OF PRINCIPAL \$

SOURCE OF FUNDS

PURPOSE AND SUBJECT OF LOBBYING ACTIVITIES

THE INDIVIDUAL (COMMISSION, COUNTY EMPLOYEE, OR PERSON ON A DECISION-MAKING BODY UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS LOBBIED

(3) PRINCIPAL

EXPENDITURES MADE ON BEHALF OF PRINCIPAL \$

SOURCE OF FUNDS

PURPOSE AND SUBJECT OF LOBBYING ACTIVITIES

THE INDIVIDUAL (COMMISSION, COUNTY EMPLOYEE, OR PERSON ON A DECISION-MAKING BODY UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS LOBBIED

(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 day of

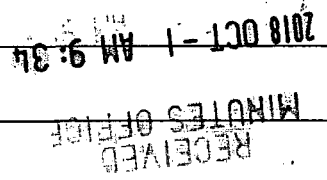
WITNESSED: Melissa Butler Deputy Clerk

Lobbyist

SWORN TO AND SUBSCRIBED Before me this day of

My Commission Expires:

Notary Public





QUARTERLY LOBBYIST STATEMENT

FOR THE PERIOD 10-1-18 THRU 12-31-18

NAME John Gucciardo / J Gucciardo Consulting LLC PHONE 239-989-5169

MAILING ADDRESS 177 Dundee Rd. F.M.B. Fl. 33931

(1) PRINCIPAL T.P.E. Hospitality Willmar Minn. 56201

EXPENDITURES MADE ON BEHALF OF PRINCIPAL \$ none

SOURCE OF FUNDS n/a

PURPOSE AND SUBJECT OF LOBBYING ACTIVITIES project development

THE INDIVIDUAL (COMMISSION, COUNTY EMPLOYEE, OR PERSON ON A DECISION-MAKING BODY UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS LOBBIED county manager / county staff adm'r staff /

(2) PRINCIPAL

EXPENDITURES MADE ON BEHALF OF PRINCIPAL \$

SOURCE OF FUNDS

PURPOSE AND SUBJECT OF LOBBYING ACTIVITIES

THE INDIVIDUAL (COMMISSION, COUNTY EMPLOYEE, OR PERSON ON A DECISION-MAKING BODY UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS LOBBIED

(3) PRINCIPAL

EXPENDITURES MADE ON BEHALF OF PRINCIPAL \$

SOURCE OF FUNDS

PURPOSE AND SUBJECT OF LOBBYING ACTIVITIES

THE INDIVIDUAL (COMMISSION, COUNTY EMPLOYEE, OR PERSON ON A DECISION-MAKING BODY UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS LOBBIED

(USE ADDITIONAL PAGES IF NECESSARY)

RECEIVED MINUTES OFFICE 2019 JAN -2 AM 9:01

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 2ND day of January, 2019

WITNESSED: Theresa King Deputy Clerk

Lobbyist signature

SWORN TO AND SUBSCRIBED Before me this day of

My Commission Expires:

Notary Public



QUARTERLY LOBBYIST STATEMENT

FOR THE PERIOD 1-1-19 THRU 3-31-19

NAME John Bucciarde / J Bucciarde Consulting LLC PHONE 239-989-5169

MAILING ADDRESS 177 Dundee Rd. Fort Myers Beach FL 33931

(1) PRINCIPAL TPI Hospitality Willmar Minn. 56201

EXPENDITURES MADE ON BEHALF OF PRINCIPAL \$ none

SOURCE OF FUNDS -

PURPOSE AND SUBJECT OF LOBBYING ACTIVITIES project development

THE INDIVIDUAL (COMMISSION, COUNTY EMPLOYEE, OR PERSON ON A DECISION-MAKING BODY UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS LOBBIED county manager / staff

(2) PRINCIPAL

EXPENDITURES MADE ON BEHALF OF PRINCIPAL \$

SOURCE OF FUNDS

PURPOSE AND SUBJECT OF LOBBYING ACTIVITIES

THE INDIVIDUAL (COMMISSION, COUNTY EMPLOYEE, OR PERSON ON A DECISION-MAKING BODY UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS LOBBIED

(3) PRINCIPAL

EXPENDITURES MADE ON BEHALF OF PRINCIPAL \$

SOURCE OF FUNDS

PURPOSE AND SUBJECT OF LOBBYING ACTIVITIES

THE INDIVIDUAL (COMMISSION, COUNTY EMPLOYEE, OR PERSON ON A DECISION-MAKING BODY UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS LOBBIED

RECEIVED MINUTES OFFICE 2019 APR -4 AM 11:18

(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 April 4th day of April 2019

WITNESSED: Theresa King Deputy Clerk

[Signature] Lobbyist

SWORN TO AND SUBSCRIBED Before me this day of

My Commission Expires:

Notary Public



QUARTERLY LOBBYIST STATEMENT

FOR THE PERIOD 4-1-19 THRU 6-30-19

NAME John Gucciardo / J Gucciardo Consulting LLC PHONE 239-989-5169

MAILING ADDRESS 177 Dundee Rd Ft Beach Fl 33931

(1) PRINCIPAL TPI Hospitality Willmer Minn. 56201

EXPENDITURES MADE ON BEHALF OF PRINCIPAL \$ none

SOURCE OF FUNDS -

PURPOSE AND SUBJECT OF LOBBYING ACTIVITIES project development

THE INDIVIDUAL (COMMISSION, COUNTY EMPLOYEE, OR PERSON ON A DECISION-MAKING BODY UNDER

THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS LOBBIED none this period.

(2) PRINCIPAL

EXPENDITURES MADE ON BEHALF OF PRINCIPAL \$

SOURCE OF FUNDS

PURPOSE AND SUBJECT OF LOBBYING ACTIVITIES

THE INDIVIDUAL (COMMISSION, COUNTY EMPLOYEE, OR PERSON ON A DECISION-MAKING BODY UNDER

THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS LOBBIED

(3) PRINCIPAL

EXPENDITURES MADE ON BEHALF OF PRINCIPAL \$

SOURCE OF FUNDS

PURPOSE AND SUBJECT OF LOBBYING ACTIVITIES

THE INDIVIDUAL (COMMISSION, COUNTY EMPLOYEE, OR PERSON ON A DECISION-MAKING BODY UNDER

THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS LOBBIED

(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 26th day of June 2019

WITNESSED:

Missy Flint Deputy Clerk

Lobbyist signature

SWORN TO AND SUBSCRIBED Before me this day of

My Commission Expires:

Notary Public

2019 JUN 26 AM 10:26 RECEPTION MINUTES OFFICE