## **ANNUAL LOBBYIST REGISTRATION**

ANNUAL LUBBTIST REGISTRATION	
LEE COUNTY SOUTHWEST FLORIDA FOR THE PERIOD JULY 1, 2019 THRU JUNE 30, 2020	
NAME Christopher lopez PHONE 239 936 3537	
MAILING ADDRESS 2840 Winkler Ave. Fort Myers, FC 33916	
LIST THE NAME AND BUSINESS ADDRESS OF EACH PRINCIPAL REPRESENTED, THEIR GENERAL AND SPECIFIC AREAS OF LEGISLATIVE INTEREST, AND THE NATURE AND EXTEDIRECT BUSINESS ASSOCIATION OR PARTNERSHIP WITH ANY CURRENT MEMBER OF THE BOARD OF COUNTY COMMISSIONERS, COUNTY STAFF, OR PERSON SITTING ON A DECISION BODY UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS WITH THE PRINCIPAL.	
(1) NAME Royal Palm Coast Realtor Association + Subsidiaries	
ADDRESS 2840 Winkler Ave. Fort Myers, FL 33916	
AREAS OF LEGISLATIVE INTEREST: ASSOCIATION WITH COMMISSIONERS, COUNTY STAFF OR MEMBERS OF DECISION-MAKING BODIES UNDER THE JURISDICTION OF THE COUNTY COMMISSIONERS.	BOARD OF
(2) NAME	
ADDRESS	
(3) NAME	
ADDRESS	
AREAS OF LEGISLATIVE INTEREST: ASSOCIATION WITH COMMISSIONERS, COUNTY STAFF OR MEMBERS OF DECISION-MAKING BODIES UNDER THE JURISDICTION OF THE COUNTY COMMISSIONERS.	BOARD OF
<u> </u>	<b>E</b>
(4) NAME	—HC
ADDRESS	or_
AREAS OF LEGISLATIVE INTEREST: ASSOCIATION WITH COMMISSIONERS, COUNTY STAFF OR MEMBERS OF DECISION-MAKING BODIES UNDER THE JURISDICTION OF THE COUNTY COMMISSIONERS.	BOARDOF
COURTY COMMISSIONERS.	(B)
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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 rest to file my annual and quarterly statements and thet I will not be notified by the Clerk's Office of my failure to do so.	po nsibility
ath Sent. and	
DATED this day of	
NOTE: This document must be witnessed by <u>either</u> the Deputy Clerk <u>or</u> e Notary Public.	
WITNESSED:	
The foregoing instrument was signed and acknowledged before me	
this 9th day of 2019 Deputy Clerk	
who produced the following as identification	
or is personally known to me, and who did/did not take an oath. [Stamp or Seal]	
JULIA ANN GORMAN MY COMMISSION #GG083756 EXPIRES: MAY 30, 2021	
[Typed or Printed Name of Notary]  Bonded through 1st State Insurance	