



ANNUAL LOBBYIST REGISTRATION

FOR THE PERIOD JULY 1, 2020 THRU JUNE 30, 2021

NAME Candice Ericks PHONE 954-648-1204
MAILING ADDRESS 205 South Adams Street, Tallahassee FL 32301

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 Waste Connections of Florida
ADDRESS 1099 Miller Drive, Altamonte Springs, FL 32701
AREAS OF LEGISLATIVE INTEREST: ASSOCIATION WITH COMMISSIONERS, COUNTY STAFF OR MEMBERS OF DECISION-MAKING BODIES UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS.
Solid Waste Disposal and Recycling Policies/Ordinances No direct business association or partnership with any current member of the Board of County Commissioners, County Staff, or persons sitting on a decision-making body under the jurisdiction of the Board

(2) NAME Shield Group Technologies
ADDRESS 3801 PGA Blvd. Palm Beach Gardens, FL 33410
AREAS OF LEGISLATIVE INTEREST: ASSOCIATION WITH COMMISSIONERS, COUNTY STAFF OR MEMBERS OF DECISION-MAKING BODIES UNDER THE JURISDICTION OF THE BOARD OF COUNTY COMMISSIONERS.
Technology application to augment county health services No direct business association or partnership with any current member of the Board of County Commissioners, County Staff, or persons sitting on a decision-making body under the jurisdiction of the Board

(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 11th day of June, 2020

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 11th day of June, 2020

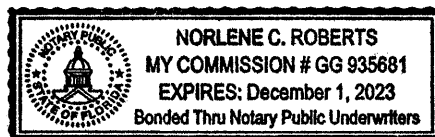
who produced the following as identification Driver License

Deputy Clerk

or is personally known to me, and who did/did not take an oath.

[Stamp or Seal]

Norlene C. Roberts
[Signature of Notary]
Norlene C. Roberts
[Typed or Printed Name of Notary]



RECEIVED
MINUTES OFFICE
2020 JUN 15 AM 11:03